

LABOR ORGANIZATION ANNUAL REPORT
FORM LM-2

MUST BE USED BY LABOR ORGANIZATIONS WITH \$30,000 OR MORE IN RECEIPTS
AND LABOR ORGANIZATIONS WHICH ARE UNDER TRUSTEESHIP

Labor-Management Reporting and Disclosure Act of 1959, as amended
and
Executive Order 11491, as amended

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. SUBMIT THIS REPORT IN DUPLICATE.

RECEIVED DOL/LMSA/LMSE AUG 13 1980 DRAD Asst. Direc.	JAMES JESINSKI, TREAS TEAMSTERS 1ND LU 00200 P O BOX 2073 MILWAUKEE WI 53201 1279 L2 M	013-815 51 4 6	1. FILE NUMBER 013-815									
			2. Period covered <table><tr><td>MO</td><td>DAY</td><td>YR</td></tr><tr><td>1</td><td>1</td><td>79</td></tr><tr><td>Thru</td><td>12</td><td>31 79</td></tr></table>	MO	DAY	YR	1	1	79	Thru	12	31 79
	MO	DAY	YR									
1	1	79										
Thru	12	31 79										
3. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE: CITY _____ COUNTY _____ STATE _____												

4. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)		8. OFFICIAL MAILING ADDRESS (For mail to the organization) (In care of) NAME OF PERSON _____													
5. AFFILIATION		NUMBER AND STREET _____													
6. DESIGNATION (Local, Lodge, etc.)	7. DESIGNATION NUMBER	BLDG. AND ROOM NUMBER, IF ANY _____													
9. Are organization records kept at the official mailing address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," show address including ZIP Code in Item 22.		CITY _____	STATE _____ ZIP CODE _____												
DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:															
<table><tr><td>10. Have any accounts in banks or other financial institutions held in a name other than that of your organization?</td><td><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td></tr><tr><td>11. Liquidate or reduce any liabilities without disbursement of cash?</td><td><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td></tr><tr><td>12. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 27.</td><td><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td></tr><tr><td>13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale?</td><td><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td></tr><tr><td>14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act?</td><td><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td></tr><tr><td>15. Discover any loss or shortage of funds or other property?</td><td><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td></tr></table> <i>(If the answer to any of the above questions is "Yes," provide details in Item 22. See specific instructions for items answered "Yes.")</i>				10. Have any accounts in banks or other financial institutions held in a name other than that of your organization?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	11. Liquidate or reduce any liabilities without disbursement of cash?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	12. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 27.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	15. Discover any loss or shortage of funds or other property?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10. Have any accounts in banks or other financial institutions held in a name other than that of your organization?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No														
11. Liquidate or reduce any liabilities without disbursement of cash?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No														
12. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 27.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No														
13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No														
14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No														
15. Discover any loss or shortage of funds or other property?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No														
16. A. Was the labor organization insured by a fidelity bond during the reporting period? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No B. If "Yes," enter the maximum amount recoverable for loss caused by any person \$ <u>215,000</u>															
17. Enter the date of your organization's next regular election of officers. Month <u>December</u> Year <u>1982</u>															
AS OF THE END OF THE REPORTING PERIOD:															
18. Were any assets pledged as security or encumbered in any other way? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No															
19. Did your organization have any contingent liabilities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If the answer to Item 18 or 19 is "Yes," provide details in Item 22.)</i>															
20. Did your organization have any changes in its constitution and bylaws (other than changed dues amounts) or in practices described in statements submitted with Form LM-1 or Form LM-1A since your organization filed Form LM-1 or most recently updated it by filing a Form LM-1A? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach an updated Form LM-1A to this report, with required documents.															
21. List fees and dues required. (Complete each line. Enter "None" or "Not Applicable" as appropriate.)		(A) If one rate applies, enter here													
(1) Initiation fee or fees required from new members _____		Minimum \$ <u>10.00</u> Maximum \$ <u>150.00</u>													
(2) Fees other than dues required from transfer members _____		\$ <u>None</u>													
(3) Are work permits issued? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," give fees required _____		\$ _____ per _____													
(4) Regular dues or fees or other periodic payments required to remain a member of the reporting labor organization (per year, mo., etc.) _____		Minimum \$ <u>12.00</u> per <u>MO.</u> Maximum \$ <u>17.00</u> per <u>MO.</u>													

22. ADDITIONAL INFORMATION (If this is a terminal report, see Section XII of the instructions.)	
Item Number	
9.	6200 West Bluemound Road Milwaukee, Wisconsin 53213
11.	Local 200 rents Building Space to Milwaukee Area Truck Drivers Health and Welfare Fund. Local 200 has a loan to the Fund. Instead of exchanging cash, a book entry is made decreasing liability and increasing income. This year's amount is \$100,615.52.
14.	Milwaukee Area Truck Drivers Health and Welfare Fund Teamsters' General Local Pension Fund.
55.	During the year 1979 \$380,511.65 in Per Capita Tax was paid to the International Brotherhood of Teamsters. A portion has been allocated as a contribution to the TAPF in accordance with the TAPF Agreement and Declaration of Trust.
<i>(If more space is needed, attach additional sheets with further statement, properly identified.)</i>	

Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete.

75. SIGNED: _____ PRESIDENT <i>(If other title, cross out and write in correct title above. Explain in Item 22.)</i> at: Milwaukee, Wisconsin on: 3/ /80 City State Date 414-771-6363 Telephone Number (Include Area Code)	76. SIGNED: _____ TREASURER <i>(If other title, cross out and write in correct title above. Explain in Item 22.)</i> at: Milwaukee, Wisconsin on: 3/ /80 City State Date 414-771-6363 Telephone Number (Include Area Code)
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*See section on "Penalties" in accompanying instructions.

STATEMENT A—ASSETS AND LIABILITIES

ASSETS		FROM SCH #	Start of Reporting Period (A)		End of Reporting Period (B)		LIABILITIES		FROM SCH #	Start of Reporting Period (C)		End of Reporting Period (D)		
Item				cts		cts	Item				cts		cts	
23.	(a) Cash on hand (Statement C, lines 1)		\$	800	XX	\$	800	32. Accounts Payable		\$	43,180	XX	\$	85,000
	(b) Cash in banks (Statement C, lines 2)			359,906	XX		288,227	33. Loans Payable	8		552,972	XX		419,986
24.	Accounts Receivable ..				XX			34. Mortgages Payable ...				XX		
25.	Loans Receivable	1			XX			35. Other Liabilities	4		163,500	XX		62,885
26.	U.S. Treasury Securities				XX			36. TOTAL LIABILITIES ..		\$	759,652	XX	\$	567,871
27.	Mortgage Investments ..				XX			NET ASSETS						
28.	Other Investments	2		21,250	XX		21,250	37. Net Assets (Item 31 less Item 36)		\$	2,205,572	XX	\$	2,290,665
29.	Fixed Assets	5		2,545,149	XX		2,492,437							
30.	Other Assets	3		38,119	XX		55,820							
31.	TOTAL ASSETS			3,965,224	XX		2,858,534							

STATEMENT B—RECEIPTS AND DISBURSEMENTS

Item	CASH RECEIPTS	FROM SCH #	(A)	cts	Item	CASH DISBURSEMENTS	FROM SCH #	(B)
38. Dues			\$1,878,622	XX	55. Per Capita Tax		5	530,429
39. Per Capita Tax				XX	56. Fees, Fines, Assessments, etc.			
40. Fees			128,715	XX	57. To Affiliates of Funds Collected on Their Behalf			
41. Fines				XX	58. For Account of Affiliates			
42. Assessments			2,810	XX	59. To Officers:		9	
43. Work Permits				XX	(a) Gross	\$ 177,798		
44. On Behalf of Affiliates for Transmittal to Them				XX	(b) Less Deductions	55,489		122,309
45. Sale of Supplies			570	XX	60. To Employees:		10	
46. Interest			29,306	XX	(a) Gross	\$ 517,847		538,964
47. Dividends				XX	(b) Less Deductions	178,883		185,244
48. Rents			200,935	XX	61. Office and Administrative Expense			6,306
49. Loans Obtained	8			XX	62. Educational and Publicity Expense			10,295
50. Sale of Investments and Fixed Assets	7		23,600	XX	63. Professional Fees			424,305
51. Repayment of Loans Made	1			XX	64. Benefits		11	
52. From Members for Disbursement on Their Behalf			1,745	XX	65. Loans Made		1	
53. From Other Sources	13		84,756	XX	66. Contributions, Gifts and Grants		12	12,750
54. TOTAL RECEIPTS (Items 38 through 53)			\$2,351,059	XX	67. Supplies for Resale			55,750
					68. Purchase of Investments and Fixed Assets		6	36,753
					69. Direct Taxes			195,585
					70. Withholding Taxes			1,745
					71. On Behalf of Individual Members			132,986
					72. Repayment of Loans Obtained		8	393,393
					73. For Other Purposes		14	
					74. TOTAL DISBURSEMENTS (Items 55 through 73)			\$2,422,738

STATEMENT C—CASH

Cash at Start of Reporting Period		(A)	Cash at End of Reporting Period		(B)
1. Cash on Hand	\$	800	1. Cash on Hand	\$	800
2. Cash in Banks (Checking Accounts and Other Deposits)		359,906	2. Cash in Banks (Checking Accounts and Other Deposits)		288,227
3. Total of Lines 1 and 2		360,706			
4. Total Receipts from Line 54		2,351,059			
5. Total of Lines 3 and 4		2,711,765			
6. Total Disbursements from Line 74		2,422,738			
7. Deduct Line 6 from Line 5	\$	289,027	3. Total of Lines 1 and 2	\$	289,027

If the amount entered in line 7, column (A) does not equal the amount entered in line 3, column (B), there is a discrepancy in your reporting. Correct the discrepancy or explain it in Item 22.

If more space is needed to list items in any of the schedules below, continue the list on additional sheets, using the same column headings used on the same sheet and enter the totals on the line provided for additional listings on the schedule.

SCHEDULE 1—LOANS RECEIVABLE

List below outstanding loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans, regardless of amount, made to business enterprises. (A)	Loans Outstanding at Start of the Period (B)	Loans Made During the Period (C)	Repayments Received During the Period		Balance at the End of the Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____	\$	\$	\$	\$	\$
2. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____					
3. Totals from Additional Listings, if any.					
4. Totals of Loans not listed above.					
5. Totals of Lines 1 through 4.	\$	\$	\$	\$	\$

Enter the Totals from Line 5 in Item 25, Column A. Item 65. Item 51. Item 22. Item 25, Column B with Explanation

Description (A)	Amount (B)
<u>Marketable Securities:</u>	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 2.	
(a) _____	
(b) _____	
(c) _____	
(d) _____	
<u>Other Investments:</u>	
4. Total Cost	21,250
5. Total Book Value	21,250
6. Itemize each Other Investment holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 5. Also itemize each subsidiary for which separate reports are attached.	
(a) Milwaukee Publishers, Inc.--Stock	21,250
(b) _____	
(c) _____	
(d) Total from Additional Listings, if any	
7. Total of Lines 2 and 5.	\$ 21,250

Enter the Total from Line 7 in _____ Item 28, Column B

SCHEDULE 3—OTHER ASSETS

Description (A)	Book Value (B)
1. Interest Receivable	\$ 7,800
2. Prepaid Expense	13,020
3. Dues Receivable	35,000
4.	
5. Total from Additional Listings, if any	55,820
6. Total of Lines 1 through 5.	\$
Enter the Total of Line 6 in Item 30, Column D	

SCHEDULE 4—OTHER LIABILITIES	
Description (A)	Amount at End of Period (B)
1. Deferred Rent	\$ 62,885
2.	
3.	
4.	
5.	
6.	
7.	
8. Total from Additional Listings, if any	
9. Total of Lines 1 through 8.	\$ 62,885
Enter the Total from Line 9 in Item 35, Column D	

SCHEDULE 5—FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation (If any) or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (Give Location): 6116, 6118, 6200, 6310 West Blumound Road, Milwaukee, Wisconsin 53213	\$ 338,769		\$ 338,769	\$ 600,000
2. Totals from Additional Listings, if any				
3. Buildings (Give Location): same	2,613,391	\$ 569,027	2,044,364	
4. Totals from Additional Listings, if any				
5. Automotive Equipment	106,190	20,573	85,617	
6. Office Furniture and Equipment	193,797	170,110	23,687	35,000
7. Other Fixed Assets				
8. Totals of Lines 1 through 7.	\$3,252,147	\$ 759,710	\$2,542,437	\$ 635,000
Enter the Total from Line 8, column D in _____ Item 29, Column B				

SCHEDULE C—PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description of Assets (If land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Building Improvements	\$ 6,897	\$ 6,897	\$ 6,897
2. Furniture and Equipment	4,370	4,370	4,370
3. Automobiles	44,483	44,483	44,483
4.			
5. Totals from Additional Listings, if any			
6. Totals of Lines 1 through 5.	\$ 55,750	\$ 55,750	\$ 55,750
Enter the Total from Line 6, Column D in			Item 68

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS

Description of Assets Sold (If land or building, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Automobiles	\$ 37,978	\$ 17,593	\$ 23,600	\$ 23,600
2.				
3.				
4. Total from Additional Listings, if any				
5. Totals of Lines 1 through 4.	\$ 37,978	\$ 17,593	\$ 23,600	\$ 23,600
Enter the Total from Line 5, Column C in _____ Item 50				

SCHEDULE B—LOANS PAYABLE

Source of Loans Payable at any Time During the Reporting Period (A)	Terms for Repayment (B)	Balance at Start of Period (C)	Loans Obtained During Period (D)	Repayment of Loans During Period		Balance at End of Period (F)
				Cash (E)(1)	Other Than Cash (E)(2)	
1. Loan		\$ 552,972	\$	\$ 132,986	\$	\$419,986
2.						
3.						
4.						
5. Total from Additional Listings, if any						
6. Totals of Lines 1 through 5.		\$ 552,972	\$	\$ 132,986	\$	\$419,986

Enter the Totals from Line 6 in

Item 33, Column C

Item 49,

Item 72,

Item 22, with Explanation

Item 33, Column D

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 9—LIST OF ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Name (Important: List all persons who held office during the period) (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. Raymond Fularczyk	Pres.	C	\$ 44,629	\$ 2,850	\$ 2,009	\$	\$ 49,488
2. James Jesinski	Sec.-Treas.	C	52,668	2,850	2,511		58,029
3. Patrick Clark	V. Pres.	N	6,100		556		6,656
4. William Butler	Rec. Secy.	C	26,360		273		26,633
5. James Flanagan	Trustee	C	20,138		353		20,491
6. Thomas Tucker	Trustee	C	6,329		380		6,709
7. Frederick Weithaus	Trustee	C	3,280		44		3,324
8. Ervin Schultz	V. Pres.	P	6,104		364		6,468
9.							
10. Total from Additional Listings, if any.							
11. Totals of Lines 1 through 10.			\$ 165,608	\$ 5,700	\$ 6,490	\$	\$ 177,798

Code for Column C, "Status": past officer—P; continuing officer—C; new officer during this reporting period—N.

Enter the Total of Line 11, Column H in

NOTE: If any officer was not elected at a regular election in accordance with the constitution and bylaws, explain in Item 22.

SCHEDULE 10—DISBURSEMENTS TO EMPLOYEES

List below all employees who received more than \$10,000 in gross salary, allowances, and other direct and indirect disbursements from this labor organization and any affiliate.		Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
(A)	Position (B)				Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. See Schedule			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6. Total from Additional Listings, if any							
7. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements.							
8. Totals of Lines 1 through 7.			\$ 489,689	\$ 14,400	\$ 13,758	\$	\$ 517,847

Enter the Total of Line 8, Column H in Item 65:

SCHEDULE 11—BENEFITS

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Pension	Trust	\$ 96,319
2. Life Insurance	Trust	62,457
3. Health & Welfare	Trust	199,061
4. Sick Dues	Local	28,222
5. Insurance-other	Trust	1,996
6. Strike	Member	16,250
7.		
8.		
9.		
10. Total from Additional Listings, if any		
11. Total of Lines 1 through 10.		\$ 404,305

Enter the Total from Line 11 in Item 64

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS

Type (A)	Amount (B)
1. Charity	\$ 9,650
2. Educational	1,100
3. Labor	2,000
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 12,750

Enter the Total from Line 11 in Item 66

SCHEDULE 13—OTHER RECEIPTS

Other Sources (A)	Amount (B)
1. Receipts from Affiliates	\$ 59,690
2. Expense Refunds	25,066
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 84,756

Enter the Total from Line 11 in Item 53

SCHEDULE 14—OTHER DISBURSEMENTS

Other Purposes (A)	Amount (B)
1. Officers, Delegates & Stewards	\$ 156,703
2. Strike	3,534
3. Building Maintenance	120,183
4. Interest	49,336
5. Recreational	4,327
6. Attendance Bonus	16,064
7. Refund of Dues & Fees	10,387
8. Payroll Deductions	38,787
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 399,327

Enter the Total from Line 11 in Item 73

TEAMSTERS "GENEPAL" LOCAL #257
Schedules for LM-2
Year Ended December 31, 1979

Schedule 10 - Disbursements to Employees

<u>Name</u>	<u>Title</u>	<u>Gross Salary</u>	<u>Allowance</u>	<u>Expenses</u>	<u>Total</u>
James Bonnett	Business Agent	\$ 34,205.04	\$ 1,800.00	\$ 815.72	\$ 36,820.76
Michael Enea	Business Agent	32,615.04	1,800.00	1,791.36	36,206.40
Kenneth Friesner	Business Repres.	35,264.96	1,800.00	1,835.79	38,900.75
* Clarence Johannes	Business Repres.	35,264.96	1,800.00	1,560.82	38,625.78
Duane Kraemer	Business Agent	32,615.04	1,800.00	2,760.10	37,175.14
Gerald Sprague	Business Agent	32,615.04	1,800.00	1,946.63	36,361.67
George Lyons	Business Agent	32,615.04	1,800.00	1,280.35	35,695.39
Howard Lewis	Business Agent	27,978.32	1,800.00	1,767.14	31,545.46
Marion Brunner	Secretary	18,732.08			18,732.08
Lorraine Christopher	"	18,732.08			18,732.08
Janice Fatura	Bookkeeper	26,470.76			26,470.76
Jessie Hess	Secretary	17,213.77			17,213.77
Mary Ann Lensby	Secretary	19,155.33			19,155.33
Diane O'Dwyer	Secretary	17,428.72			17,428.72
Ann Lampone	Secretary	17,318.24			17,318.24
Richard Klegin	Maintenance	12,971.08			12,971.08
Amollie Lawrence	Secretary	19,315.87			19,315.87
Bonnie Potter	Secretary	15,439.20			15,439.20
Others					
Under \$10,000		43,738.87			43,738.87
	Total	\$489,689.44	\$ 14,400.00	\$13,757.91	\$517,847.35
		=====	=====	=====	=====

* DECEASED

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. SUBMIT THIS REPORT IN DUPLICATE.

Item Number	Additional Information (If this is a terminal report, see Section XII of the instructions.)
9	6200 West Bluemound Road, Milwaukee, Wisconsin 53213
59	<p>James Jesinski was appointed Secretary-Treasurer when signed.</p> <p>Donald Tilkens was appointed Recording Secretary.</p> <p>Raymond Fularczyk was appointed Trustee.</p> <div data-bbox="1002 1887 1409 2096"> <p>MSA MINNEAPOLIS</p> <p>RECEIVED</p> <p>APR 25 1978 PM</p> <p>AM</p> <p>7 8 9 10 11 12 1 2 3 4 5 6</p> </div>

(If more space is needed, attach additional sheets with further statement, properly identified.)

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law,* that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete.

76. SIGNED: *[Signature]* TREASURER
(If other title, press
out and write in
correct title above
Explain in item 22.)
at: Milwaukee, Wisconsin 3/28/78
City State Date
Telephone Number (Include Area Code)

*See section on "Penalties" in accompanying instructions.

1. ASSETS		FROM SCH =	Start of Reporting Period (A)		End of Reporting Period (B)		2. LIABILITIES		FROM SCH =	Start of Reporting Period (C)		End of Reporting Period (D)			
Item				cts		cts	Item				cts		cts		
23.	(a) Cash on hand (Statement C, lines 1)		\$	XX	\$	XX	32.	Accounts Payable		\$	XX	\$	XX		
	(b) Cash in banks (Statement C, lines 2)		246,342	XX	286,774	XX	33.	Loans Payable	8		XX		XX		
24.	Accounts Receivable ..			XX		XX	34.	Mortgages Payable ...			XX		XX		
25.	Loans Receivable	1		XX		XX	35.	Other Liabilities	4		XX		XX		
26.	U.S. Treasury Securities			XX		XX	36.	TOTAL LIABILITIES ..		\$	XX	\$	XX		
27.	Mortgage Investments.			XX		XX		NET ASSETS							
28.	Other Investments ...	2		XX		XX									
29.	Fixed Assets	5		XX		XX	37.	Net Assets (Item 31 less Item 36)		\$	249,750	XX	\$	291,157	XX
30.	Other Assets	3		3,408		4,383									
31.	TOTAL ASSETS		\$	249,750	\$	291,157									

STATEMENT B—RECEIPTS AND DISBURSEMENTS

Item	CASH RECEIPTS	FROM SCH #	(A)	cts	Item	CASH DISBURSEMENTS	FROM SCH #	(B)	cts
38. Dues			\$	XX	55. Per Capita Tax			\$	XX
39. Per Capita Tax			263,547	XX	56. Fees, Fines, Assessments, etc.				XX
40. Fees				XX	57. To Affiliates of Funds Collected on Their Behalf				XX
41. Fines				XX	58. For Account of Affiliates				XX
42. Assessments				XX	59. To Officers:		9		
43. Work Permits				XX	(a) Gross	\$ 6,000			
44. On Behalf of Affiliates for Transmittal to Them				XX	(b) Less Deductions			6,000	XX
45. Sale of Supplies				XX	60. To Employees:		10		
46. Interest			13,783	XX	(a) Gross	\$			XX
47. Dividends				XX	(b) Less Deductions				
48. Rents				XX	61. Office and Administrative Expense			5,251	XX
49. Loans Obtained	8			XX	62. Educational and Publicity Expense			41,740	XX
50. Sale of Investments and Fixed Assets	7			XX	63. Professional Fees			114,538	XX
51. Repayment of Loans Made	1			XX	64. Benefits		11	50,826	XX
52. From Members for Disbursement on Their Behalf				XX	65. Loans Made		1		XX
53. From Other Sources	13		720	XX	66. Contributions, Gifts and Grants		12	2,150	XX
54. TOTAL RECEIPTS (Items 38 through 53)			\$ 278,050	XX	67. Supplies for Resale				XX
					68. Purchase of Investments and Fixed Assets		6		XX
					69. Direct Taxes				XX
					70. Withholding Taxes				XX
					71. On Behalf of Individual Members				XX
					72. Repayment of Loans Obtained		8		XX
					73. For Other Purposes		14	17,113	XX
					74. TOTAL DISBURSEMENTS (Items 55 through 73)			\$ 237,618	XX

STATEMENT C—CASH

Cash at Start of Reporting Period		(A)	Cash at End of Reporting Period		(B)
1.	Cash on Hand	\$	1.	Cash on Hand	\$
2.	Cash in Banks (Checking Accounts and Other Deposits)	246,342	2.	Cash in Banks (Checking Accounts and Other Deposits)	286,774
3.	Total of Lines 1 and 2	246,342			
4.	Total Receipts from Line 54	278,050			
5.	Total of Lines 3 and 4	524,392			
6.	Total Disbursements from Line 74	237,618			
7.	Deduct Line 5 from Line 6	\$ 286,774	3.	Total of Lines 1 and 2	\$ 286,774

If the amount entered in line 7, column (A) does not equal the amount entered in line 3, column (B), there is a discrepancy in your reporting. Correct the discrepancy or explain it in Item 22.

If more space is needed to list items in any of the schedules below, continue the list on additional sheets, using the same column headings used on the schedule and enter the totals on the line provided for additional listings on the schedule.

SCHEDULE 1—LOANS RECEIVABLE

List below outstanding loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans, regardless of amount, made to business enterprises. (A)	Loans Outstanding at Start of the Period (B)	Loans Made During the Period (C)	Repayments Received During the Period		Balance at the End of the Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____	\$	\$	\$	\$	\$
2. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____					
3. Totals from Additional Listings, if any.					
4. Totals of Loans not Listed above.					
5. Totals of Lines 1 through 4.	\$	\$	\$	\$	\$

Enter the Totals from Line 5 in Item 25, Column A Item 65, Column A Item 51, Column A Item 22, with Explanation Item 25, Column B

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 2.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	
5. Total Book Value	
6. Itemize each Other Investment holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 5. Also itemize each subsidiary for which separate reports are attached.	
(a)	
(b)	
(c)	
(d) Total from Additional Listings, if any	
7. Total of Lines 2 and 5.	\$
Enter the Total from Line 7 in Item 28, Column B	

Description (A)	Book Value (B)
1. Interest Receivable	\$ 3,789
2. Prepaid Expense	594
3.	
4.	
5. Total from Additional Listings, if any	
6. Total of Lines 1 through 5.	\$ 4,383
Enter the Total of Line 6 in Item 30, Column B	
SCHEDULE 4—OTHER LIABILITIES	
Description (A)	Amount at End of Period (B)
1.	\$
2.	
3.	
4.	
5.	
6.	
7.	
8. Total from Additional Listings, if any	
9. Total of Lines 1 through 8.	\$
Enter the Total from Line 9 in Item 35, Column D	

SCHEDULE 5—FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation (If any) or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (Give Location):	\$		\$	\$
2. Totals from Additional Listings, if any				
3. Buildings (Give Location):	\$			
4. Totals from Additional Listings, if any				
5. Automotive Equipment				
6. Office Furniture and Equipment				
7. Other Fixed Assets				
8. Totals of Lines 1 through 7.	\$	\$	\$	\$
Enter the Total from Line 8, column D in Item 29, Column B				

SCHEDULE 6—PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description of Assets (If land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1.	\$	\$	\$
2.			
3.			
4.			
5. Totals from Additional Listings, if any			
6. Totals of Lines 1 through 5.	\$	\$	\$
Enter the Total from Line 6, Column D in Item 68			

Assets Traded In on Assets Purchased: Description of Asset Traded In (A)	Cost (B)	Book Value (C)	Trade-In Allowance (D)
(a)	\$	\$	\$
(b)			

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS

Description of Assets Sold (If land or building, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1.	\$	\$	\$	\$
2.				
3.				
4. Total from Additional Listings, if any				
5. Totals of Lines 1 through 4.	\$	\$	\$	\$
Enter the Total from Line 5, Column E in Item 50				

SCHEDULE 8—LOANS PAYABLE

Source of Loans Payable at any Time During the Reporting Period (A)	Terms for Repayment (B)	Balance at Start of Period (C)	Loans Obtained During Period (D)	Repayment of Loans During Period		Balance at End of Period (F)
				Cash (E)(1)	Other Than Cash (E)(2)	
1.		\$	\$	\$	\$	\$
2.						
3.						
4.						
5. Total from Additional Listings, if any						
6. Totals of Lines 1 through 5.		\$	\$	\$	\$	\$
Enter the Totals from Line 6 in		Item 33, Column C	Item 49	Item 72	Item 22 with Explanation	Item 33, Column D

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 9—LIST OF ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Name (Important: List all persons who held office during the period) (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. Milton Veleke	Pres.	C	\$	\$	\$	\$	\$
2. Robert Schlieve	Vice-Pr.	C					
3. James Jesinski	Sec.-Tr.	N		6,000			6,000
4. Donald Tilkens	Rec. Sec.	N					
5. Richard Chamberlain	Trustee	C					
6. Leo Lotharius	"	C					
7. Raymond Fularczyk	"	N					
8. Roy Lane	Sec.-Tr.	P					
9.							
10. Total from Additional Listings, if any.							
11. Totals of Lines 1 through 10.			\$	6,000	\$	\$	6,000

Code for Column C, "Status": past officer—P; continuing officer—C; new officer during this reporting period—N.

Enter the Total of Line 11, Column H in Item 59(a)

NOTE: If any officer was not elected at a regular election in accordance with the constitution and bylaws, explain in Item 22.

SCHEDULE 10—DISBURSEMENTS TO EMPLOYEES

List below all employees who received more than \$10,000 in gross salary, allowances, and other direct and indirect disbursements from this labor organization and any affiliate.							
(A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1.			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6. Total from Additional Listings, if any							
7. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements.							
8. Totals of Lines 1 through 7.			\$	\$	\$	\$	\$

Enter the Total of Line 8, Column H in Item 60(a)

SCHEDULE 11—BENEFITS

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Health & Welfare	Trust	\$ 25,121
2. Severance	Members	25,705
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10. Total from Additional Listings, if any.		
11. Total of Lines 1 through 10.		\$ 50,826

Enter the Total from Line 11 in Item 64

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS

Type (A)	Amount (B)
1. Charity	\$ 2,150
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any.	
11. Total of Lines 1 through 10.	\$ 2,150

Enter the Total from Line 11 in Item 66

SCHEDULE 13—OTHER RECEIPTS

Other Sources (A)	Amount (B)
1. Air Travel	\$ 710
2. Contracts	10
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10	\$ 720

Enter the Total from Line 11 in Item 53

SCHEDULE 14—OTHER DISBURSEMENTS

Other Purposes (A)	Amount (B)
1. Meetin Expense	\$ 12,074
2. Loss of Travel Service	4,149
3. Air Travel	890
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 17,113

Enter the Total from Line 11 in Item 73

LABOR ORGANIZATION ANNUAL REPORT
FORM LM-2

MUST BE USED BY LABOR ORGANIZATIONS WITH \$30,000 OR MORE IN RECEIPTS
AND LABOR ORGANIZATIONS WHICH ARE UNDER TRUSTEESHIP

Labor-Management Reporting and Disclosure Act of 1959, as amended
and
Executive Order 11491, as amended

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. SUBMIT THIS REPORT IN DUPLICATE.

JAMES JESINSKI TEAMSTERS IND JC 00039 POST OFFICE BOX 2073 MILWAUKEE WI 53201 1278 L2 M		013-817 51 4 2		1. FILE NUMBER 013-817																					
				2. Period covered <table><tr><td>MO</td><td>DAY</td><td>YR</td></tr><tr><td>1</td><td>1</td><td>78</td></tr><tr><td colspan="3">From</td></tr><tr><td>12</td><td>31</td><td>78</td></tr><tr><td colspan="3">Thru</td></tr></table>		MO	DAY	YR	1	1	78	From			12	31	78	Thru							
MO	DAY	YR																							
1	1	78																							
From																									
12	31	78																							
Thru																									
3. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE: CITY <u>Milwaukee</u> COUNTY <u>Milwaukee</u> STATE <u>Wisconsin</u>																									
4. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)			8. OFFICIAL MAILING ADDRESS (For mail to the organization): (In care of) NAME OF PERSON																						
5. AFFILIATION			NUMBER AND STREET																						
6. DESIGNATION (Local, Lodge, etc.)		7. DESIGNATION NUMBER		BLDG. AND ROOM NUMBER, IF ANY																					
9. Are organization records kept at the official mailing address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," show address including ZIP Code in Item 22.			CITY STATE ZIP CODE																						
DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY: <table><tr><td>YES</td><td>NO</td></tr><tr><td>10. Have any accounts in banks or other financial institutions held in a name other than that of your organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td><td></td></tr><tr><td>11. Liquidate or reduce any liabilities without disbursement of cash? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td><td></td></tr><tr><td>12. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td><td></td></tr><tr><td>13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td><td></td></tr><tr><td>14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td><td></td></tr><tr><td>15. Discover any loss or shortage of funds or other property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td><td></td></tr></table> (If the answer to any of the above questions is "Yes," provide details in Item 22. See specific instructions for items answered "Yes.")			YES	NO	10. Have any accounts in banks or other financial institutions held in a name other than that of your organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		11. Liquidate or reduce any liabilities without disbursement of cash? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		12. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		15. Discover any loss or shortage of funds or other property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		16. A. Was the labor organization insured by a fidelity bond during the reporting period? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No B. If "Yes," enter the maximum amount recoverable for loss caused by any person \$ <u>42,500</u>								
YES	NO																								
10. Have any accounts in banks or other financial institutions held in a name other than that of your organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																									
11. Liquidate or reduce any liabilities without disbursement of cash? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																									
12. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																									
13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																									
14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																									
15. Discover any loss or shortage of funds or other property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																									
			17. Enter the date of your organization's next regular election of officers. Month <u>January</u> Year <u>1981</u>																						
			AS OF THE END OF THE REPORTING PERIOD: 18. Were any assets pledged as security or encumbered in any other way? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 19. Did your organization have any contingent liabilities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If the answer to Item 18 or 19 is "Yes," provide details in Item 22.)																						
			20. Did your organization have any changes in its constitution and bylaws (other than changed dues amounts) or in practices described in statements submitted with Form LM-1 or Form LM-1A since your organization filed Form LM-1 or most recently updated it by filing a Form LM-1A? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach an updated Form LM-1A to this report, with required documents.																						
21. List fees and dues required. (Complete each line. Enter "None" or "Not Applicable" as appropriate.) <table><tr><td>(1) Initiation fee or fees required from new members</td><td>\$</td><td>(A) If one rate applies, enter here</td><td>(B) If more than one rate applies, enter here</td></tr><tr><td>(2) Fees other than dues required from transfer members</td><td>\$</td><td>Minimum</td><td>Maximum</td></tr><tr><td>(3) Are work permits issued? <input type="checkbox"/> Yes <input type="checkbox"/> No</td><td></td><td></td><td></td></tr><tr><td>If "Yes," give fees required</td><td>\$</td><td>per</td><td>per</td></tr><tr><td>(4) Regular dues or fees or other periodic payments required to remain a member of the reporting labor organization (per year, mo., etc.)</td><td>\$</td><td>Per Capita Tax from Affiliated Locals.</td><td>per</td></tr></table>			(1) Initiation fee or fees required from new members	\$	(A) If one rate applies, enter here	(B) If more than one rate applies, enter here	(2) Fees other than dues required from transfer members	\$	Minimum	Maximum	(3) Are work permits issued? <input type="checkbox"/> Yes <input type="checkbox"/> No				If "Yes," give fees required	\$	per	per	(4) Regular dues or fees or other periodic payments required to remain a member of the reporting labor organization (per year, mo., etc.)	\$	Per Capita Tax from Affiliated Locals.	per			
(1) Initiation fee or fees required from new members	\$	(A) If one rate applies, enter here	(B) If more than one rate applies, enter here																						
(2) Fees other than dues required from transfer members	\$	Minimum	Maximum																						
(3) Are work permits issued? <input type="checkbox"/> Yes <input type="checkbox"/> No																									
If "Yes," give fees required	\$	per	per																						
(4) Regular dues or fees or other periodic payments required to remain a member of the reporting labor organization (per year, mo., etc.)	\$	Per Capita Tax from Affiliated Locals.	per																						
22. ADDITIONAL INFORMATION (If this is a terminal report, see Section XII of the instructions.)																									

Item Number

9

6200 West Bluemound Road, Milwaukee, WI 53213

59

Claude S. Marek was appointed Recording Secretary when Donald Tilkens resigned.

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law,* that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete.

75. SIGNED: Donald Tilkens PRESIDENT
(If other title, cross out and write in correct title above. Explain in Item 22.)
at: Pau Claire WI on: 3-26-79
City State Date

76. SIGNED: John J. Marek TREASURER
(If other title, cross out and write in correct title above. Explain in Item 22.)
at: Milw Wis on: 3-15-79
City State Date

715-2356106
Telephone Number (Include Area Code)

414-771-6363
Telephone Number (Include Area Code)

*See section on "Penalties" in accompanying instructions.

FILL OUT SCHEDULES 1 THROUGH 14 BEFORE
FILLING OUT STATEMENTS A THROUGH C

ENTER AMOUNTS IN DOLLARS ONLY
STATEMENT A—ASSETS AND LIABILITIES

Item	ASSETS	FROM SCH #	Start of Reporting Period (A)		End of Reporting Period (B)		Item	LIABILITIES	FROM SCH #	Start of Reporting Period (C)		End of Reporting Period (D)	
			cts		cts					cts		cts	
23.	(a) Cash on hand (Statement C, lines 1)			XX		XX	32.	Accounts Payable			XX		XX
	(b) Cash in banks ... (Statement C, lines 2)		286,774	XX	343,235	XX	33.	Loans Payable	8		XX		XX
24.	Accounts Receivable ..			XX		XX	34.	Mortgages Payable ...			XX		XX
25.	Loans Receivable	1		XX		XX	35.	Other Liabilities	4		XX		XX
26.	U.S. Treasury Securities			XX		XX	36.	TOTAL LIABILITIES ..			XX		XX
27.	Mortgage Investments ..			XX		XX	NET ASSETS						
28.	Other Investments ...	2		XX		XX							
29.	Fixed Assets	5		XX		XX	37.	Net Assets (Item 31 less Item 36)		291,157	XX	348,703	XX
30.	Other Assets	3	4,383	XX	5,468	XX							
31.	TOTAL ASSETS		291,157	XX	348,703	XX							

STATEMENT B—RECEIPTS AND DISBURSEMENTS

Item	CASH RECEIPTS	FROM SCH #	(A)		Item	CASH DISBURSEMENTS	FROM SCH #	(B)	
			cts					cts	
38.	Dues			XX	55.	Per Capita Tax			XX
39.	Per Capita Tax		317,481	XX	56.	Fees, Fines, Assessments, etc.			XX
40.	Fees			XX	57.	To Affiliates of Funds Collected on Their Behalf			XX
41.	Fines			XX	58.	For Account of Affiliates			XX
42.	Assessments			XX	59.	To Officers:	9		
43.	Work Permits			XX	(a) Gross	6,000		6,000	XX
44.	On Behalf of Affiliates for Transmittal to Them			XX	(b) Less Deductions				
45.	Sale of Supplies		19,108	XX	60.	To Employees:	10		
46.	Interest			XX	(a) Gross				XX
47.	Dividends			XX	(b) Less Deductions				
48.	Rents			XX	61.	Office and Administrative Expense		17,452	XX
49.	Loans Obtained	8		XX	62.	Educational and Publicity Expense		52,300	XX
50.	Sale of Investments and Fixed Assets	7		XX	63.	Professional Fees		122,987	XX
51.	Repayment of Loans Made	1		XX	64.	Benefits	11	70,698	XX
52.	From Members for Disbursement on Their Behalf			XX	65.	Loans Made	1		XX
53.	From Other Sources	13	759	XX	66.	Contributions, Gifts and Grants	12	11,450	XX
54.	TOTAL RECEIPTS (Items 38 through 53)		337,348	XX	67.	Supplies for Resale			XX
					68.	Purchase of Investments and Fixed Assets	6		XX
					69.	Direct Taxes			XX
					70.	Withholding Taxes			XX
					71.	On Behalf of Individual Members			XX
					72.	Repayment of Loans Obtained	8		XX
					73.	For Other Purposes	14		XX
					74.	TOTAL DISBURSEMENTS (Items 55 through 73)		280,887	XX

STATEMENT C—CASH

Cash at Start of Reporting Period		(A)	Cash at End of Reporting Period		(B)
1.	Cash on Hand	286,774	1.	Cash on Hand	343,235
2.	Cash in Banks (Checking Accounts and Other Deposits)	286,774	2.	Cash in Banks (Checking Accounts and Other Deposits)	343,235
3.	Total of Lines 1 and 2	337,348			
4.	Total Receipts from Line 54	624,122			
5.	Total of Lines 3 and 4	280,887			
6.	Total Disbursements from Line 74	343,235			
7.	Deduct Line 6 from Line 5		3.	Total of Lines 1 and 2	343,235

If the amount entered in line 7, column (A) does not equal the amount entered in line 3, column (B), there is a discrepancy in your reporting. Correct the discrepancy or explain it in Item 22.

If more space is needed to list items in any of the schedules below, continue the list on additional sheets, using the same column headings used on the schedule and enter the totals on the line provided for additional listings on the schedule.

SCHEDULE 1—LOANS RECEIVABLE

List below outstanding loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans, regardless of amount, made to business enterprises. (A)	Loans Outstanding at Start of the Period (B)	Loans Made During the Period (C)	Repayments Received During the Period		Balance at the End of the Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____	\$	\$	\$	\$	\$
2. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____					
3. Totals from Additional Listings, if any.					
4. Totals of Loans not Listed above.					
5. Totals of Lines 1 through 4.	\$	\$	\$	\$	\$

Enter the Totals from Line 5 in Item 25, Item 65, Item 81, Item 22, Item 25,
Column A, with Explanation Column B

MORTGAGE INVESTMENTS

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 2.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	
5. Total Book Value	
6. Itemize each Other Investment holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 5. Also itemize each subsidiary for which separate reports are attached.	
(a)	
(b)	
(c)	
(d) Total from Additional Listings, if any	
7. Total of Lines 2 and 5.	\$
Enter the Total from Line 7 in Item 28, Column B	

Description (A)	Book Value (B)
1. Interest Receivable	\$ 4,880
2. Air Line Deposit	425
3. Prepaid Expense	163
4.	
5. Total from Additional Listings, if any	
6. Total of Lines 1 through 5.	\$ 5,468
Enter the Total of Line 6 in Item 30, Column B	
SCHEDULE 4—OTHER LIABILITIES	
Description (A)	Amount at End of Period (B)
1.	\$
2.	
3.	
4.	
5.	
6.	
7.	
8. Total from Additional Listings, if any	
9. Total of Lines 1 through 8.	\$
Enter the Total from Line 9 in Item 35, Column D	

SCHEDULE 5—FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation (If any) or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (Give Location):	\$		\$	\$
2. Totals from Additional Listings, if any				
3. Buildings (Give Location):		\$		
4. Totals from Additional Listings, if any				
5. Automotive Equipment				
6. Office Furniture and Equipment				
7. Other Fixed Assets				
8. Totals of Lines 1 through 7.	\$	\$	\$	\$
Enter the Total from Line 8, column D in Item 29, Column B				

SCHEDULE 6—PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description of Assets (If land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1.	\$	\$	\$
2.			
3.			
4.			
5. Totals from Additional Listings, if any			
6. Totals of Lines 1 through 5.	\$	\$	\$
Enter the Total from Line 6, Column D in Item 68			

7. Assets Traded In on Assets Purchased:	Cost (B)	Book Value (C)	Trade-In Allowance (D)
Description of Asset Traded In (A)			
(a)	\$	\$	\$
(b)			

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS

Description of Assets Sold (If land or building, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1.	\$	\$	\$	\$
2.				
3.				
4. Total from Additional Listings, if any				
5. Totals of Lines 1 through 4.	\$	\$	\$	\$
Enter the Total from Line 5, Column E in Item 50				

SCHEDULE 8—LOANS PAYABLE

Source of Loans Payable at any Time During the Reporting Period (A)	Terms for Repayment (B)	Balance at Start of Period (C)	Loans Obtained During Period (D)	Repayment of Loans During Period		Balance at End of Period (F)
				Cash (E)(1)	Other Than Cash (E)(2)	
1.		\$	\$	\$	\$	\$
2.						
3.						
4.						
5. Total from Additional Listings, if any						
6. Totals of Lines 1 through 5.		\$	\$	\$	\$	\$
Enter the Totals from Line 6 in Item 33, Column C Item 49 Item 72 Item 22 with Explanation Item 33, Column D						

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 9—LIST OF ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Name (Important: List all persons who held office during the period) (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. M. Veleke	Pres.	C	\$	\$	\$	\$	\$
2. R. Schlieve	V. Pres.	C					
3. J. Jesinski	Sec. Treas.	C		6,000			6,000
4. C. Marek	Rec. Sec.	N					
5. R. Chamberlain	Trustee	C					
6. L. Lotharius	Trustee	C					
7. R. Fularczyk	Trustee	C					
8. D. Tilkens	Rec. Sec.	P					
9.							
10. Total from Additional Listings, if any.							
11. Totals of Lines 1 through 10.			\$	\$ 6,000	\$	\$	\$ 6,000

Code for Column C, "Status": past officer—P; continuing officer—C; new officer during this reporting period—N.

Enter the Total of Line 11, Column H in Item 59(a)
NOTE: If any officer was not elected at a regular election in accordance with the constitution and bylaws, explain in Item 22.

SCHEDULE 10—DISBURSEMENTS TO EMPLOYEES

List below all employees who received more than \$10,000 in gross salary, allowances, and other direct and indirect disbursements from this labor organization and any affiliate.		Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
(A)	Position (B)				Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1.			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6. Total from Additional Listings, if any							
7. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements.							
8. Totals of Lines 1 through 7.			\$	\$	\$	\$	\$

Enter the Total of Line 8, Column H in Item 60(a)

SCHEDULE 11—BENEFITS

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Health and Welfare	Trust	\$ 26,118
2. Severance	Members	44,580
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10. Total from Additional Listings, if any		
11. Total of Lines 1 through 10.		\$ 70,698

Enter the Total from Line 11 in Item 64

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS

Type (A)	Amount (B)
1. Charity	\$ 1,000
2. Political Contributions	10,450
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 11,450

Enter the Total from Line 11 in Item 66

SCHEDULE 13—OTHER RECEIPTS

Other Sources (A)	Amount (B)
1. Air Travel	\$ 279
2. Reimbursed Expense	237
3. Travel Trust Receipts	243
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 759

Enter the Total from Line 11 in Item 53

SCHEDULE 14—OTHER DISBURSEMENTS

Other Purposes (A)	Amount (B)
1.	\$
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$

Enter the Total from Line 11 in Item 73

LABOR ORGANIZATION ANNUAL REPORT
FORM LM-2

MUST BE USED BY LABOR ORGANIZATIONS WITH \$30,000 OR MORE IN RECEIPTS
AND LABOR ORGANIZATIONS WHICH ARE UNDER TRUSTEESHIP

Labor-Management Reporting and Disclosure Act of 1959, as amended
and
Executive Order 11491, as amended

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. SUBMIT THIS REPORT IN DUPLICATE.

JAMES JESINSKI TEAMSTERS IND JC 00039 POST OFFICE BOX 2073 MILWAUKEE WI 53201 1279 L27M	013-817 51 4 2	1. FILE NUMBER 013-817
		2. Period covered From MO DAY YR 1 1 79 Thru 12 31 79

3. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE:

CITY Milwaukee COUNTY Milwaukee STATE Wisconsin

NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)

8. OFFICIAL MAILING ADDRESS (For mail to the organization):

(In care of) NAME OF PERSON

AFFILIATION

NUMBER AND STREET

DESIGNATION (Local, Lodge, etc.)

7. DESIGNATION NUMBER

BLDG. AND ROOM NUMBER, IF ANY

Are organization records kept at the official mailing address? ☐ Yes ☐ No
If "No," show address including ZIP Code in Item 22.

CITY

STATE

ZIP CODE

DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:

YES NO

1. Have any accounts in banks or other financial institutions held in a name other than that of your organization? ☐ Yes ☒ No
2. Liquidate or reduce any liabilities without disbursement of cash? ☐ Yes ☒ No
3. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? ☐ Yes ☒ No
4. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale? ☐ Yes ☒ No
5. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act? ☐ Yes ☒ No
6. Discover any loss or shortage of funds or other property? ☐ Yes ☒ No
- (If the answer to any of the above questions is "Yes," provide details in Item 22. See specific instructions for items answered "Yes.")

16. A. Was the labor organization insured by a fidelity bond during the reporting period? ☒ Yes ☐ No
B. If "Yes," enter the maximum amount recoverable for loss caused by any person \$ 42,500

17. Enter the date of your organization's next regular election of officers.

Month January Year 1981

AS OF THE END OF THE REPORTING PERIOD:

18. Were any assets pledged as security or encumbered in any other way? ☐ Yes ☒ No
19. Did your organization have any contingent liabilities? ☐ Yes ☒ No
(If the answer to Item 18 or 19 is "Yes," provide details in Item 22.)
20. Did your organization have any changes in its constitution and bylaws (other than changed dues amounts) or in practices described in statements submitted with Form LM-1 or Form LM-1A since your organization filed Form LM-1 or most recently updated it by filing a Form LM-1A? ☐ Yes ☒ No
If "Yes," attach an updated Form LM-1A to this report, with required documents.

1. List fees and dues required. (Complete each line. Enter "None" or "Not Applicable" as appropriate.)

- (1) Initiation fee or fees required from new members \$ N/A
- (2) Fees other than dues required from transfer members \$ N/A
- (3) Are work permits issued? ☐ Yes ☐ No
If "Yes," give fees required \$ N/A per
- (4) Regular dues or fees or other periodic payments required to remain a member of the reporting labor organization (per year, mo., etc.) \$ Per Capita Tax from Affiliated Locals per

(A) If one rate applies, enter here

(B) If more than one rate applies, enter here

Minimum

Maximum

2. ADDITIONAL INFORMATION (If this is a terminal report, see Section XII of the instructions.)

Item Number	
9	6200 West Blue Mound Road

MINNEAPOLIS
RECEIVED
AM JAN 11 1980 PM
7 8 9 10 11 12 1 2 3 4 5 6

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law,* that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete.

5. SIGNED: William V. Vande PRESIDENT

(If other title, cross out and write in correct title above. Explain in Item 22.)

City Milwaukee State WI Date 1-13-80

Telephone Number (Include Area Code) 415 835 6106

76. SIGNED: M. L. W. S. TREASURER

(If other title, cross out and write in correct title above. Explain in Item 22.)

City Milwaukee State WI Date 3/4/80

Telephone Number (Include Area Code) 1-414-771-6363

*See section on "Penalties" in accompanying instructions.

ENTER AMOUNTS IN DOLLARS ONLY

FILL OUT SCHEDULES 1 THROUGH 14 BEFORE
FILLING OUT STATEMENTS A THROUGH C

STATEMENT A—ASSETS AND LIABILITIES

Item	ASSETS	FROM SCH #	Start of Reporting Period (A)		End of Reporting Period (B)		Item	LIABILITIES	FROM SCH #	Start of Reporting Period (C)		End of Reporting Period (D)	
			cts		cts					cts		cts	
23.	(a) Cash on hand (Statement C, lines 1)			XX		XX	32.	Accounts Payable			XX		X
	(b) Cash in banks (Statement C, lines 2)		343,235	XX	412,048	XX	33.	Loans Payable	8		XX		X
24.	Accounts Receivable ..			XX		XX	34.	Mortgages Payable ...			XX		X
25.	Loans Receivable	1		XX		XX	35.	Other Liabilities	4		XX		X
26.	U.S. Treasury Securities			XX		XX	36.	TOTAL LIABILITIES ..			XX		X
27.	Mortgage Investments ..			XX		XX		NET ASSETS					
28.	Other Investments ...	2		XX		XX							
29.	Fixed Assets	5	5,468	XX	17,172	XX	37.	Net Assets (Item 31 less Item 36)		348,703	XX	429,220	XX
30.	Other Assets	3		XX		XX							
31.	TOTAL ASSETS		348,703	XX	429,220	XX							

STATEMENT B—RECEIPTS AND DISBURSEMENTS

Item	CASH RECEIPTS	FROM SCH #	(A)		Item	CASH DISBURSEMENTS	FROM SCH #	(B)	
			cts					cts	
38.	Dues			XX	55.	Per Capita Tax			XX
39.	Per Capita Tax		356,658	XX	56.	Fees, Fines, Assessments, etc.			XX
40.	Fees			XX	57.	To Affiliates of Funds Collected on Their Behalf			XX
41.	Fines			XX	58.	For Account of Affiliates			XX
42.	Assessments			XX	59.	To Officers:	9		
43.	Work Permits			XX	(a) Gross	6,000		6,000	XX
44.	On Behalf of Affiliates for Transmittal to Them			XX	(b) Less Deductions				
45.	Sale of Supplies			XX	60.	To Employees:	10		
46.	Interest		21,047	XX	(a) Gross				
47.	Dividends			XX	(b) Less Deductions			21,058	XX
48.	Rents			XX	61.	Office and Administrative Expense		53,593	XX
49.	Loans Obtained	8		XX	62.	Educational and Publicity Expense		147,866	XX
50.	Sale of Investments and Fixed Assets	7		XX	63.	Professional Fees		76,992	XX
51.	Repayment of Loans Made	1		XX	64.	Benefits	11		XX
52.	From Members for Disbursement on Their Behalf			XX	65.	Loans Made	1		XX
53.	From Other Sources	13	2,117	XX	66.	Contributions, Gifts and Grants	12	5,500	XX
54.	TOTAL RECEIPTS (Items 38 through 53)		379,822	XX	67.	Supplies for Resale			XX
					68.	Purchase of Investments and Fixed Assets	6		XX
					69.	Direct Taxes			XX
					70.	Withholding Taxes			XX
					71.	On Behalf of Individual Members			XX
					72.	Repayment of Loans Obtained	8		XX
					73.	For Other Purposes	14		XX
					74.	TOTAL DISBURSEMENTS (Items 55 through 73)		311,009	XX

STATEMENT C—CASH

Cash at Start of Reporting Period		(A)	Cash at End of Reporting Period		(B)
1.	Cash on Hand	\$	1.	Cash on Hand	\$
2.	Cash in Banks (Checking Accounts and Other Deposits)	343,235	2.	Cash in Banks (Checking Accounts and Other Deposits)	412,048
3.	Total of Lines 1 and 2	343,235			
4.	Total Receipts from Line 54	379,822			
5.	Total of Lines 3 and 4	723,057			
6.	Total Disbursements from Line 74	311,009			
7.	Deduct Line 6 from Line 5	412,048	3.	Total of Lines 1 and 2	412,048

If the amount entered in line 7, column (A) does not equal the amount entered in line 3, column (B), there is a discrepancy in your reporting. Correct the discrepancy or explain it in Item 22.

If more space is needed to list items in any of the schedules below, continue the list on additional sheets, using the same column headings used on the schedule and enter the totals on the line provided for additional listings on the schedule.

SCHEDULE 1—LOANS RECEIVABLE

List below outstanding loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans, regardless of amount, made to business enterprises. (A)	Loans Outstanding at Start of the Period (B)	Loans Made During the Period (C)	Repayments Received During the Period		Balance at the End of the Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. (Name)					
(Purpose)					
(Security)					
(Terms of Repayment)					
2. (Name)					
(Purpose)					
(Security)					
(Terms of Repayment)					
3. Totals from Additional Listings, if any.					
4. Totals of Loans not Listed above.					
5. Totals of Lines 1 through 4.					

Enter the Totals from Line 5 in Item 25, Item 65, Item 51, Item 22, Item 25,
Column A. Column B. with Explanation Column B

MORTGAGE INVESTMENTS

SCHEDULE 3—OTHER ASSETS

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 2.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	
5. Total Book Value	
6. Itemize each Other Investment holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 5. Also itemize each subsidiary for which separate reports are attached.	
(a)	
(b)	
(c)	
(d) Total from Additional Listings, if any	
7. Total of Lines 2 and 5.	\$
Enter the Total from Line 7 in Item 28, Column B	

Description (A)	Book Value (B)
1. Interest Receivable	\$ 16,250
2. Airline Deposit	425
3. Prepaid Expense	147
4. Per Capita Tax Receivable	350
5. Total from Additional Listings, if any	
6. Total of Lines 1 through 5.	\$ 17,172
Enter the Total of Line 6 in Item 30, Column B	
SCHEDULE 4—OTHER LIABILITIES	
Description (A)	Amount at End of Period (B)
1.	\$
2.	
3.	
4.	
5.	
6.	
7.	
8. Total from Additional Listings, if any	
9. Total of Lines 1 through 8.	\$
Enter the Total from Line 9 in Item 35, Column D	

SCHEDULE 5—FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation (If any) or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (Give Location):	\$		\$	\$
2. Totals from Additional Listings, if any				
3. Buildings (Give Location):		\$		
4. Totals from Additional Listings, if any				
5. Automotive Equipment				
6. Office Furniture and Equipment				
7. Other Fixed Assets				
8. Totals of Lines 1 through 7.	\$	\$	\$	\$
Enter the Total from Line 8, column D in Item 29, Column B				

SCHEDULE 6—PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description of Assets (If land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1.	\$	\$	\$
2.			
3.			
4.			
5. Totals from Additional Listings, if any			
6. Totals of Lines 1 through 5.	\$	\$	\$
Enter the Total from Line 6, Column D in Item 68			

7. Assets Traded In on Assets Purchased:	Cost (B)	Book Value (C)	Trade-In Allowance (D)
Description of Asset Traded In (A)			
(a)	\$	\$	\$
(b)			

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS

Description of Assets Sold (If land or building, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1.	\$	\$	\$	\$
2.				
3.				
4. Total from Additional Listings, if any				
5. Totals of Lines 1 through 4.	\$	\$	\$	\$
Enter the Total from Line 5, Column E in Item 50				

SCHEDULE 8—LOANS PAYABLE

Source of Loans Payable at any Time During the Reporting Period (A)	Terms for Repayment (B)	Balance at Start of Period (C)	Loans Obtained During Period (D)	Repayment of Loans During Period		Balance at End of Period (F)
				Cash (E)(1)	Other Than Cash (E)(2)	
1.		\$	\$	\$	\$	\$
2.						
3.						
4.						
5. Total from Additional Listings, if any						
6. Totals of Lines 1 through 5.		\$	\$	\$	\$	\$
Enter the Totals from Line 6 in Item 33, Column C Item 49 Item 72 Item 22, with Explanation Item 33, Column D						

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 9—LIST OF ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Name (Important: List all persons who held office during the period) (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. M. Veleke	Pres.	C	\$	\$	\$	\$	\$
2. R. Chamberlain	V-Pres.	N					
3. J. Jesinski	Sec.-Tr.	C		6,000			6,000
4. R. Rutland	Rec. Sec.	N					
5. G. Mueller	Trustee	N					
6. C. Marek	Trustee	N					
7. R. Fularczyk	Trustee	C					
8. R. Schleve	V-Pres.	P (deceased)					
9. L. Lotharius	Trustee	P (retired)					
10. Total from Additional Listings, if any.							
11. Totals of Lines 1 through 10.			\$	6,000	\$	\$	6,000

Code for Column C, "Status": past officer—P; continuing officer—C; new officer during this reporting period—N.

Enter the Total of Line 11, Column H in Item 59(a)

NOTE: If any officer was not elected at a regular election in accordance with the constitution and bylaws, explain in Item 22.

SCHEDULE 10—DISBURSEMENTS TO EMPLOYEES

List below employees who received more than \$10,000 in gross salary, allowances, other direct and indirect disbursements from this labor organization and any affiliate. (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1.			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6. Total from Additional Listings, if any							
7. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements.							
8. Totals of Lines 1 through 7.			\$	\$	\$	\$	\$

Enter the Total of Line 8, Column H in Item 60(a)

SCHEDULE 11—BENEFITS

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Health-Welfare	Trust	\$ 26,839
2. Severance	Members	50,153
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10. Total from Additional Listings, if any		
11. Total of Lines 1 through 10.		\$ 76,992

Enter the Total from Line 11 in Item 64

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS

Type (A)	Amount (B)
1. Political	\$ 500
2. Charity	5,000
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 5,500

Enter the Total from Line 11 in Item 66

SCHEDULE 13—OTHER RECEIPTS

Other Sources (A)	Amount (B)
1. Expense Refund	\$ 2,117
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 2,117

Enter the Total from Line 11 in Item 53

SCHEDULE 14—OTHER DISBURSEMENTS

Other Purposes (A)	Amount (B)
1.	\$
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$

Enter the Total from Line 11 in Item 73

LABOR ORGANIZATION ANNUAL REPORT
FORM LM-2

MUST BE USED BY LABOR ORGANIZATIONS WITH \$30,000 OR MORE IN RECEIPTS
AND LABOR ORGANIZATIONS WHICH ARE UNDER TRUSTEESHIP

Labor-Management Reporting and Disclosure Act of 1959, as amended
and
Executive Order 11491, as amended

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. SUBMIT THIS REPORT IN DUPLICATE.

JAMES JFSINSKI, TREAS TEAMSTERS IND LU 00200 P O BOX 2073 MILWAUKEE WI 53201 1280 L2 M		013-815 51 4 6	1. FILE NUMBER 013-815	
			2. Period covered	MO DAY YR
			From	1 1 80
			Thru	12 31 80
3. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE: CITY _____ COUNTY _____ STATE _____				
4. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)		8. OFFICIAL MAILING ADDRESS (For mail to the organization): (In care of) NAME OF PERSON _____		
5. AFFILIATION		NUMBER AND STREET _____		
6. DESIGNATION (Local, Lodge, etc.)		7. DESIGNATION NUMBER _____		
		BLDG. AND ROOM NUMBER, IF ANY _____		
9. Are organization records kept at the official mailing address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," show address including ZIP Code in Item 22.		CITY _____ STATE _____ ZIP CODE _____		
DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:				
YES NO				
10. Have any accounts in banks or other financial institutions held in a name other than that of your organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
11. Liquidate or reduce any liabilities without disbursement of cash? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
12. Create or participate in the administration of any business enterprises or other organizations which meet the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
15. Discover any loss or shortage of funds or other property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(If the answer to any of the above questions is "Yes," provide details in Item 22. See specific instructions for items answered "Yes.")				
16. A. Was the labor organization insured by a fidelity bond during the reporting period? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No B. If "Yes," enter the maximum amount recoverable for loss caused by any person \$ 277,000				
17. Enter the date of your organization's next regular election of officers. Month December Year 1982				
AS OF THE END OF THE REPORTING PERIOD:				
18. Were any assets pledged as security or encumbered in any other way? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
19. Did your organization have any contingent liabilities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If the answer to Item 18 or 19 is "Yes," provide details in Item 22.)				
20. Did your organization have any changes in its constitution and bylaws (other than changed dues amounts) or in practices described in statements submitted with Form LM-1 or Form LM-1A since your organization filed Form LM-1 or most recently updated it by filing a Form LM-1A? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach an updated Form LM-1A to this report, with required documents.				
21. List fees and dues required. (Complete each line. Enter "None" or "Not Applicable" as appropriate.)		(A) If one rate applies, enter here		
(1) Initiation fee or fees required from new members		\$ 10.00		
(2) Fees other than dues required from transfer members		\$ none		
(3) Are work permits issued? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," give fees required		\$ _____ per _____		
(4) Regular dues or fees or other periodic payments required to remain a member of the reporting labor organization (per year, mo., etc.)		\$ 12.00 per mo \$ 21.00 per mo		

2. ADDITIONAL INFORMATION (If this is a terminal report, see Section XII of the instructions.)

Item Number	See attached schedule
-------------	-----------------------

3 APR 1981

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law,* that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete.

25. SIGNED: <u>[Signature]</u> PRESIDENT (If other title, cross out and write in correct title above. Explain in Item 22.) at: Milwaukee, Wisconsin on: 3/1/81 City State Date 414-771-6363 Telephone Number (Include Area Code)	26. SIGNED: <u>[Signature]</u> TREASURER (If other title, cross out and write in correct title above. Explain in Item 22.) at: Milwaukee, Wisconsin on: 3/1/81 City State Date 414-771-6363 Telephone Number (Include Area Code)
---	---

*See section on "Penalties" in accompanying instructions.

ENTER AMOUNTS IN DOLLARS ONLY

STATEMENT A—ASSETS AND LIABILITIESSTATEMENT B—RECEIPTS AND DISBURSEMENTS

STATEMENT C—CASH

If more space is needed to list items in any of the schedules below, continue the list on additional sheets, using the same column headings used on the schedule and enter the totals on the line provided for additional listings on the schedule.

SCHEDULE 1—LOANS RECEIVABLE

Enter the Totals from Line 5 in Item 25, Item 65, Item 51, Item 22, Item 25,
Column A, with Explanation Column B

SCHEDULE 2—INVESTMENTS OTHER THAN U.S. TREASURY SECURITIES AND MORTGAGE INVESTMENTS

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 2.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	121,250
5. Total Book Value	121,250
6. Itemize each Other Investment holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 5. Also itemize each subsidiary for which separate reports are attached.	
(a) Debentures	100,000
(b)	
(c)	
(d) Total from Additional Listings, if any	
7. Total of Lines 2 and 5.	\$ 121,250
Enter the Total from Line 7 in Item 28, Column B	

SCHEDULE 3—OTHER ASSETS

Description (A)	Book Value (B)
1. Interest Receivable	\$ 8,668
2. Prepaid Expense	2,700
3.	
4.	
5. Total from Additional Listings, if any	
6. Total of Lines 1 through 5.	\$ 11,368
Enter the Total of Line 6 in Item 30, Column B	

SCHEDULE 4—OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. Lease Payable	\$ 74,597
2.	
3.	
4.	
5.	
6.	
7.	
8. Total from Additional Listings, if any	
9. Total of Lines 1 through 8.	\$
Enter the Total from Line 9 in Item 35, Column D	

SCHEDULE 5—FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation (If any) or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (Give Location): 6116, 6118, 6200, 6310 West Bluemound Road, Milwaukee, WI	\$ 338,769		338,769	650,000
2. Totals from Additional Listings, if any				
3. Buildings (Give Location): same as above	2,613,391	\$ 628,611	1,984,780	
4. Totals from Additional Listings, if any				
5. Automotive Equipment	121,456	18,925	102,531	
6. Office Furniture and Equipment	274,422	176,885	97,537	42,000
7. Other Fixed Assets				
8. Totals of Lines 1 through 7.	\$3,366,038	\$ 824,421	\$2,523,617	\$692,000
Enter the Total from Line 8, column D in Item 29, Column B				

SCHEDULE 6—PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description of Assets (If land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Automobiles	\$ 76,974	\$ 76,974	\$ 76,974
2. Debentures - Milwaukee Publishers, Inc.	102,500	102,500	102,500
3. Equipment	701	701	701
4.			
5. Totals from Additional Listings, if any			
6. Totals of Lines 1 through 5.	\$ 180,175	\$180,175	\$ 180,175
Enter the Total from Line 6, Column D in Item 68			

7. Assets Traded In on Assets Purchased:			
Description of Asset Traded In (A)	Cost (B)	Book Value (C)	Trade-In Allowance (D)
(a)	\$	\$	\$
(b)			

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS

Description of Assets Sold (If land or building, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Automobiles	\$ 61,708	\$ 32,627	\$ 31,850	\$ 31,850
2.				
3.				
4. Total from Additional Listings, if any				
5. Totals of Lines 1 through 4.	\$ 61,708	\$ 32,627	\$ 31,850	\$ 31,850
Enter the Total from Line 5, Column E in Item 50				

SCHEDULE 8—LOANS PAYABLE

Source of Loans Payable at any Time During the Reporting Period (A)	Terms for Repayment (B)	Balance at Start of Period (C)	Loans Obtained During Period (D)	Repayment of Loans During Period		Balance at End of Period (F)
				Cash (E)(1)	Other Than Cash (E)(2)	
1. Loan		\$ 419,986	\$	\$ 28,464	\$	\$ 391,522
2.						
3.						
4.						
5. Total from Additional Listings, if any						
6. Totals of Lines 1 through 5.		\$	\$	\$	\$	\$

Enter the Totals from Line 6 in Item 33, Column C Item 49 Item 72 Item 22, with Explanation Item 33, Column D

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 9—LIST OF ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Name (Important: List all persons who held office during the period) (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. R. Fularczyk	Pres.	C	\$ 46,227	\$ 2,400	\$ 2,451		\$ 51,078
2. J. Jesinski	Sec-Treas.	C	51,904	2,400	1,354		55,658
3. P. Clark	V-Pres.	C	10,251		1,220		11,471
4. W. Butler	Rec.-Sec.	C	29,116		799		29,915
5. J. Flanagan	Trustee	C	28,572		3,935		32,507
6. T. Tucker	Trustee	C	10,201		918		11,119
7. F. Weithaus	Trustee	C	5,180		63		5,243
8.							
9.							
10. Total from Additional Listings, if any.							
11. Totals of Lines 1 through 10.			\$ 181,451	\$ 4,800	\$ 10,740		\$ 196,991

Code for Column C, "Status": past officer—P; continuing officer—C; new officer during this reporting period—N.

Enter the Total of Line 11, Column H in Item 59(a)

NOTE: If any officer was not elected at a regular election in accordance with the constitution and bylaws, explain in Item 22.

SCHEDULE 10—DISBURSEMENTS TO EMPLOYEES

List below all employees who received more than \$10,000 in gross salary, allowances, and other direct and indirect disbursements from this labor organization and any affiliate.

(A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. See Schedule			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6. Total from Additional Listings, if any							
7. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements.							
8. Totals of Lines 1 through 7.			\$ 586,920	\$ 18,000	\$ 16,804	\$	\$ 621,724

Enter the Total of Line 8, Column H in Item 60(a)

SCHEDULE 11—BENEFITS

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Out of Work	Members	\$ 22,820
2. Pension	Trust	117,327
3. Life Insurance	Trust	57,424
4. Health & Welfare	Trust	100,403
5. Sick Dues	Trust	28,031
6.		
7.		
8.		
9.		
10. Total from Additional Listings, if any		
11. Total of Lines 1 through 10.		\$ 326,005

Enter the Total from Line 11 in Item 64

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS

Type (A)	Amount (B)
1. Charity	\$ 3,950
2. Labor	1,250
3. Educational	600
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 5,800

Enter the Total from Line 11 in Item 66

SCHEDULE 13—OTHER RECEIPTS

Other Sources (A)	Amount (B)
1. Affiliate	\$ 72,065
2. Expense Refund	19,373
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 91,438

Enter the Total from Line 11 in Item 53

SCHEDULE 14—OTHER DISBURSEMENTS

Other Purposes (A)	Amount (B)
1. Strike Expense	\$ 14,567
2. Refund of Dues & Fees	11,062
3. Payroll Deduction	38,753
4. Lease Payments	7,129
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 71,511

Enter the Total from Line 11 in Item 73

TEAMSTERS GENERAL LOCAL #200

SCHEDULE LM-2

DECEMBER 31, 1980

Schedule 10 - Disbursements to Employees:

<u>NAME</u>	<u>TITLE</u>	<u>SALARY</u>	<u>ALLOWANCE</u>	<u>EXPENSE</u>	<u>TOTAL</u>
J. Bonnett	Business Agent	\$ 38,551.68	\$ 1,800.00	\$ 1,364.40	\$ 41,716.08
M. Enea	" "	37,541.68	1,950.00	1,564.05	41,055.73
K. Friesner	" "	39,224.96	1,800.00	2,145.29	43,170.25
C. Johannes	" "	25,566.64	1,200.00	740.64	27,507.28
D. Kraemer	" "	37,541.68	1,950.00	2,506.97	41,998.65
H. Lewis	" "	36,575.04	1,950.00	2,044.59	40,569.63
G. Lyons	" "	36,575.04	1,950.00	909.18	39,434.22
G. Sprague	" "	37,541.68	1,800.00	1,937.35	41,279.03
S. Busalacchi	" "	22,010.00	1,800.00	1,524.25	25,352.25
F. Busalacchi	" "	21,635.00	1,800.00	2,049.32	25,484.32
M. Brunner	Secretary	10,009.98			10,009.98
L. Christopher	"	21,408.38			21,408.38
J. Fatura	Bookkeeper	29,263.67			29,263.67
J. Hess	Secretary	19,754.78			19,754.78
R. Klegin	Maintenance	14,346.83			14,346.83
A. Lampone	Secretary	20,086.93			20,086.93
A. Lawrence	"	22,700.29			22,700.29
M. Lensby	"	22,860.93			22,860.93
D. O'Dwyer	"	17,863.39			17,836.39
B. Potter	"	17,995.23			17,995.23
D. Puffer	Maintenance	19,809.41			19,809.41
Less than \$10,000.00		38,084.11			38,084.11
		\$586,920.33	\$18,000.00	\$16,804.04	\$621,724.37

3 APR 1981

TEAMSTERS GENERAL LOCAL #200

SCHEDULE LM-2

DECEMBER 31, 1980

Line 22 - Additional Information

- Line 9 - 6200 West Bluemound Road, Milwaukee, Wisconsin 53213
- Line 11 - Local #200 rents to Milwaukee Area Truck Drivers Health and Welfare Fund. Local #200 had a loan owed to the Fund. Instead of exchanging cash a book entry is made decreasing liability and increasing income. This year's amount is \$62,885.04
- Line 13 - Purchase of Telephone Equipment of \$79,925.00 on a 12% five year lease purchase.
- Line 14 - Milwaukee Area Truck Drivers Health and Welfare Fund. Teamsters General Local #200 Pension Trust Fund.
- Line 55 - During the year 1980, \$346,105.75 in Per Capita Tax was paid to the International Brotherhood of Teamsters. A portion has been allocated as a contribution to the TAPF in accordance with the TAPF agreement and Declaration of Trust.
- Line 59-60- A total of \$26,253.00 in gas was bought in bulk and not allocated among the officers and business agents.

APR 1981

3 APR 1981

LABOR ORGANIZATION ANNUAL REPORT
FORM LM-2

MUST BE USED BY LABOR ORGANIZATIONS WITH \$30,000 OR MORE IN RECEIPTS
AND LABOR ORGANIZATIONS WHICH ARE UNDER TRUSTEESHIP

Labor-Management Reporting and Disclosure Act of 1959, as amended
and
Executive Order 11491, as amended

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. SUBMIT THIS REPORT IN DUPLICATE.

JUN 5-1979



JAMES JESINSKI, TREAS
TEAMSTERS IND
LU 00200
P.O. BOX 2073
MILWAUKEE

013-815
514 6
1278
L2 M
WI 53201

1. FILE NUMBER

013-815

6

2. Period covered

From

Thru

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DAY

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1

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78

12

31

78

3. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE:

CITY

COUNTY

STATE

4. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)

8. OFFICIAL MAILING ADDRESS (For mail to the organization):

(In care of) NAME OF PERSON

5. AFFILIATION

NUMBER AND STREET

5. DESIGNATION (Local, Lodge, etc.)

7. DESIGNATION NUMBER

BLDG. AND ROOM NUMBER, IF ANY

9. Are organization records kept at the official mailing address? ☐ Yes ☒ No
If "No," show address including ZIP Code in Item 22.

CITY

STATE

ZIP CODE

DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:

YES NO

10. Have any accounts in banks or other financial institutions held in a name other than that of your organization? ☐ Yes ☒ No
11. Liquidate or reduce any liabilities without disbursement of cash? ☒ Yes ☐ No
12. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? ☐ Yes ☒ No
13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale? ☐ Yes ☒ No
14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act? ☒ Yes ☐ No
15. Discover any loss or shortage of funds or other property? ☐ Yes ☒ No

(If the answer to any of the above questions is "Yes," provide details in Item 22. See specific instructions for items answered "Yes.")

16. A. Was the labor organization insured by a fidelity bond during the reporting period? ☒ Yes ☐ No
B. If "Yes," enter the maximum amount recoverable for loss caused by any person \$215,000

17. Enter the date of your organization's next regular election of officers.

Month December Year 1979

AS OF THE END OF THE REPORTING PERIOD:

18. Were any assets pledged as security or encumbered in any other way? ☐ Yes ☒ No
19. Did your organization have any contingent liabilities? ☐ Yes ☒ No
(If the answer to Item 18 or 19 is "Yes," provide details in Item 22.)

20. Did your organization have any changes in its constitution and bylaws (other than changed dues amounts) or in practices described in statements submitted with Form LM-1 or Form LM-1A since your organization filed Form LM-1 or most recently updated it by filing a Form LM-1A? ☐ Yes ☒ No
If "Yes," attach an updated Form LM-1A to this report, with required documents.

21. List fees and dues required. (Complete each line. Enter "None" or "Not Applicable" as appropriate.)

- (1) Initiation fee or fees required from new members \$
- (2) Fees other than dues required from transfer members \$ None
- (3) Are work permits issued? ☐ Yes ☒ No
If "Yes," give fees required \$ per
- (4) Regular dues or fees or other periodic payments required to remain a member of the reporting labor organization (per year, mo., etc.) \$ per

(A) If one rate applies, enter here

(B) If more than one rate applies, enter here

Minimum

Maximum

\$ 10.00

\$ 150.00

\$

\$

\$

\$

\$

\$

\$ 12.00 per Mo.

\$ 15.00 per Mo.

22. ADDITIONAL INFORMATION (If this is a terminal report, see Section XII of the instructions.)

Item Number

9. 6200 West Bluemound Road Milwaukee, Wisconsin 53213

11. Local 200 rents to Milwaukee Area Truck Drivers Health and Welfare Fund
Local 200 has a loan to the Fund. Instead of exchanging cash, a book entry is made decreasing liability and increasing income.
This year's amount is \$75,461.64.

14. Milwaukee Area Truck Drivers Health and Welfare Fund
Teamsters' General Local 200 Pension Fund.

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law,* that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief, true, correct, and complete.

75. SIGNED: James Jesinski PRESIDENT

(If other title, cross out and write in correct title above. Explain in Item 22.)

at: Milwaukee, Wis. on: 3/23

City

State

Date

414-771-6363

Telephone Number (Include Area Code)

76. SIGNED: M. L. Wisc. TREASURER

(If other title, cross out and write in correct title above. Explain in Item 22.)

at: Milwaukee, Wis. on: 3/23/79

City

State

Date

414-771-6363

Telephone Number (Include Area Code)

*See section on "Penalties" in accompanying instructions.

ENTER AMOUNTS IN DOLLARS ONLY

STATEMENT A—ASSETS AND LIABILITIES

ASSETS		FROM SCH #	Start of Reporting Period (A)	cts	End of Reporting Period (B)	cts	LIABILITIES		FROM SCH #	Start of Reporting Period (C)	cts	End of Reporting Period (D)	cts
23. (a) Cash on hand (Statement C, lines 1)			\$ 800	XX	\$ 800	XX	32. Accounts Payable			\$ 126	XX	\$ 43,180	XX
(b) Cash in banks ... (Statement C, lines 2)			200,468	XX	359,906	XX	33. Loans Payable	8		579,457	XX	552,972	XX
24. Accounts Receivable ..				XX		XX	34. Mortgages Payable ...				XX		XX
25. Loans Receivable	1			XX		XX	35. Other Liabilities	4		238,962	XX	163,500	XX
26. U.S. Treasury Securities				XX		XX	36. TOTAL LIABILITIES ..			\$ 818,545	XX	\$ 759,652	XX
27. Mortgage Investments.				XX		XX							
28. Other Investments ...	2		21,250	XX	21,250	XX							
29. Fixed Assets	5		2,588,571	XX	2,545,149	XX	37. Net Assets (Item 31 less Item 36)			2,002,377	XX	2,205,572	XX
30. Other Assets	3		9,833	XX	38,119	XX							
31. TOTAL ASSETS			\$2,820,922	XX	\$2,965,224	XX							

STATEMENT B—RECEIPTS AND DISBURSEMENTS

Item	CASH RECEIPTS	FROM SCH #	(A)	cts	Item	CASH DISBURSEMENTS	FROM SCH #	(B)	cts
38. Dues			\$1,634,430	XX	55. Per Capita Tax			\$ 492,168	XX
39. Per Capita Tax				XX	56. Fees, Fines, Assessments, etc.				XX
40. Fees			147,247	XX	57. To Affiliates of Funds Collected on Their Behalf				XX
41. Fines				XX	58. For Account of Affiliates				XX
42. Assessments			6,057	XX	59. To Officers:		9		
43. Work Permits				XX	(a) Gross	\$ 136,952			
44. On Behalf of Affiliates for Transmittal to Them				XX	(b) Less Deductions	41,717		95,235	XX
45. Sale of Supplies			675	XX	60. To Employees:		10		
46. Interest			13,702	XX	(a) Gross	\$ 461,153			
47. Dividends				XX	(b) Less Deductions	157,078		304,075	XX
48. Rents			226,090	XX	61. Office and Administrative Expense			160,101	XX
49. Loans Obtained	8			XX	62. Educational and Publicity Expense			15,855	XX
50. Sale of Investments and Fixed Assets	7		25,300	XX	63. Professional Fees			8,231	XX
51. Repayment of Loans Made	1			XX	64. Benefits		11	257,633	XX
52. From Members for Disbursement on Their Behalf			1,238	XX	65. Loans Made		1		XX
53. From Other Sources	13		80,538	XX	66. Contributions, Gifts and Grants		12	3,925	XX
54. TOTAL RECEIPTS (Items 38 through 53)			\$2,135,277	XX	67. Supplies for Resale				XX
					68. Purchase of Investments and Fixed Assets		6	63,394	XX
					69. Direct Taxes			30,700	XX
					70. Withholding Taxes			164,781	XX
					71. On Behalf of Individual Members			1,238	XX
					72. Repayment of Loans Obtained		8	26,485	XX
					73. For Other Purposes		14	352,018	XX
					74. TOTAL DISBURSEMENTS (Items 55 through 73)			\$1,975,839	XX

STATEMENT C—CASH

Cash at Start of Reporting Period		(A)	Cash at End of Reporting Period		(B)
1. Cash on Hand		\$ 800	1. Cash on Hand		\$ 800
2. Cash in Banks (Checking Accounts and Other Deposits)		200,468	2. Cash in Banks (Checking Accounts and Other Deposits)		359,906
3. Total of Lines 1 and 2		201,268			
4. Total Receipts from Line 54		2,135,276			
5. Total of Lines 3 and 4		2,336,544			
6. Total Disbursements from Line 74		1,975,839			
7. Deduct Line 6 from Line 5		\$ 360,706	3. Total of Lines 1 and 2		\$ 360,706

If the amount entered in line 7, column (A) does not equal the amount entered in line 3, column (B), there is a discrepancy in your reporting. Correct the discrepancy or explain it in Item 22.

If more space is needed to list items in any of the schedules below, continue the list on additional sheets, using the same column headings used on the schedule and enter the totals on the line provided for additional listings on the schedule.

SCHEDULE 1—LOANS RECEIVABLE -

List below outstanding loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans, regardless of amount, made to business enterprises. (A)	Loans Outstanding at Start of the Period (B)	Loans Made During the Period (C)	Repayments Received During the Period		Balance at the End of the Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____	\$	\$	\$	\$	\$
2. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____					
3. Totals from Additional Listings, if any.					
4. Totals of Loans not Listed above.					
5. Totals of Lines 1 through 4.	\$	\$	\$	\$	\$

Enter the Totals from Line 5 in Item 25, Item 65 Item 51 Item 22 Item 25,
Column A. with Explanation Column B

SCHEDULE 2—INVESTMENTS OTHER THAN U.S. TREASURY SECURITIES AND MORTGAGE INVESTMENTS

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 2.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	21,250
5. Total Book Value	21,250
6. Itemize each Other Investment holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 5. Also itemize each subsidiary for which separate reports are attached.	
(a) Milwaukee Publishers, Inc. -Stock	21,250
(b)	
(c)	
(d) Total from Additional Listings, if any	
7. Total of Lines 2 and 5.	\$ 21,250
Enter the Total from Line 7 in Item 28, Column B	

SCHEDULE 3—OTHER ASSETS

Description (A)	Book Value (B)
1. Interest Receivable	\$ 6,366
2. Prepaid Expense	16,321
3. Other Receivables	15,432
4.	
5. Total from Additional Listings, if any	
6. Total of Lines 1 through 5.	\$ 38,119
Enter the Total of Line 6 in Item 30, Column B	

SCHEDULE 4—OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. Deferred Rent	\$ 163,500
2.	
3.	
4.	
5.	
6.	
7.	
8. Total from Additional Listings, if any	
9. Total of Lines 1 through 8.	\$ 163,500
Enter the Total from Line 9 in Item 35, Column D	

SCHEDULE 5—FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation (If any) or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (Give Location): 6200 W. Bluemound Road	\$ 338,769		\$ 338,769	\$ 550,000
2. Totals from Additional Listings, if any				
3. Buildings (Give Location): 6200 W. Bluemound Road	2,606,494	509,539	2,096,955	
4. Totals from Additional Listings, if any				
5. Automotive Equipment	99,685	15,242	84,443	
6. Office Furniture and Equipment	189,426	164,444	24,982	35,000
7. Other Fixed Assets				
8. Totals of Lines 1 through 7.	\$ 3,234,374	\$ 689,225	\$ 2,545,149	\$ 585,000
Enter the Total from Line 8, column D in		Item 29, Column B		

SCHEDULE 6—PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description of Assets (If land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Furniture and Equipment	\$ 1,494	\$ 1,494	\$ 1,494
2. Automobile	61,900	61,900	61,900
3.			
4.			
5. Totals from Additional Listings, if any			
6. Totals of Lines 1 through 5.	\$ 63,394	\$ 63,394	\$ 63,394
Enter the Total from Line 6, Column D in		Item 68	

7. Assets Traded In on Assets Purchased:	Cost (B)	Book Value (C)	Trade-In Allowance (D)
Description of Asset Traded In (A)			
(a)	\$	\$	\$
(b)			

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS

Description of Assets Sold (If land or building, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Automobiles	\$ 40,453	\$ 19,340	\$ 24,200	\$ 24,200
2. Equipment	1,887	1,376	1,100	1,100
3.				
4. Total from Additional Listings, if any				
5. Totals of Lines 1 through 4.	\$ 42,340	\$ 20,716	\$ 25,300	\$ 25,300
Enter the Total from Line 5, Column E in		Item 50		

SCHEDULE 8—LOANS PAYABLE

Source of Loans Payable at any Time During the Reporting Period (A)	Terms for Repayment (B)	Balance at Start of Period (C)	Loans Obtained During Period (D)	Repayment of Loans During Period		Balance at End of Period (F)
				Cash (E)(1)	Other Than Cash (E)(2)	
1.		\$ 579,457	\$	\$ 26,485	\$	\$ 552,972
2.						
3.						
4.						
5. Total from Additional Listings, if any						
6. Totals of Lines 1 through 5.		\$ 579,457	\$	\$ 26,485	\$	\$ 552,972

Enter the Totals from Line 6 in Item 33, Column C Item 49 Item 72 Item 22, with Explanation Item 33, Column D

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 9—LIST OF ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Name (Important: List all persons who held office during the period) (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. Raymond Fularczyk	President	C	\$ 37,775	\$ 2,200	\$ 2,538	\$	\$ 42,513
2. James Jesinski	Sec. Treas.	C	41,750	2,200	2,770		46,720
3. Ervin Schultz	V. P.	C	6,968		432		7,400
4. William Butler	Rec. Sec.	C	23,120		567		23,687
5. James Flanagan	Trustee	C	6,875		404		7,279
6. Patrick Clark	Trustee	C	4,311		420		4,731
7. Thomas Tucker	Trustee	C	4,311		311		4,622
8.							
9.							
10. Total from Additional Listings, if any.							
11. Totals of Lines 1 through 10.			\$ 125,110	\$ 4,400	\$ 7,442	\$	\$ 136,952

Code for Column C, "Status": past officer—P; continuing officer—C; new officer during this reporting period—N.

Enter the Total of Line 11, Column H in Item 59(a)

NOTE: If any officer was not elected at a regular election in accordance with the constitution and bylaws, explain in Item 22.

SCHEDULE 10—DISBURSEMENTS TO EMPLOYEES

List below all employees who received more than \$10,000 in gross salary, allowances, and other direct and indirect disbursements from this labor organization and any affiliate. (A)		Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
						Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1.				\$	\$	\$	\$	\$
2.	See Schedule							
3.								
4.								
5.								
6. Total from Additional Listings, if any								
7. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements.								
8. Totals of Lines 1 through 7.				\$ 422,231	\$ 11,900	\$ 27,022	\$	\$ 461,153

Enter the Total of Line 8, Column H in Item 60(a)

SCHEDULE 11—BENEFITS

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Out of Work	Members	\$ 31,460
2. Pension	Trust	79,933
3. Life	Trust	64,632
4. Health and Welfare	Trust	59,844
5. Sick Dues	Members	21,688
6. Insurance	Trust	76
7.		
8.		
9.		
10. Total from Additional Listings, if any		
11. Total of Lines 1 through 10.		\$ 257,633

Enter the Total from Line 11 in Item 64

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS

Type (A)	Amount (B)
1. Education	\$ 2,650
2. Charity	1,275
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 3,925

Enter the Total from Line 11 in Item 66

SCHEDULE 13—OTHER RECEIPTS

Other Sources (A)	Amount (B)
1. Receipts from Affiliates	\$ 63,065
2. Expense Refunds	17,473
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 80,538

Enter the Total from Line 11 in Item 53

SCHEDULE 14—OTHER DISBURSEMENTS

Other Purposes (A)	Amount (B)
1. Attendance Bonus	\$ 20,988
2. Recreation	2,860
3. Interest	59,559
4. Strike	109
5. Refund of Dues and Fees	10,126
6. Building Maintenance	97,476
7. Payroll Deductions	34,014
8. Automobile Expense	9,341
9. Stewards, Travel and Meeting	117,545
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$352,018

Enter the Total from Line 11 in Item 73

TEAMSTERS "GENERAL" LOCAL #200
Schedules for LM-2
Year Ended December 31, 1978

Item 22 - Additional Information

Line 55 - During the year 1978 \$366,104.10 in Per Capita Tax was paid to the International Brotherhood of Teamsters. A portion has been allocated to the contribution to the TAPF in accordance with the TAPF Agreement and Declaration of Trust.

Line 73 - Automobile Expenses included in schedule are bulk purchase of gasoline and supplies. A proper allocation of the expenses to the individual business agents and full-time officers is proportionately divided.

Schedule 10 - Disbursements to Employees

<u>Name</u>	<u>Title</u>	<u>Gross</u> <u>Salary</u>	<u>Allowance</u>	<u>Expenses</u>	<u>Total</u>
Roy Lane	Business Agent	\$ 13,216.68	\$ 600.00	\$ 1,921.08	\$ 15,737.76
James Bonnett	Business Agent	31,415.04	1,450.00	2,365.48	35,230.52
Michael Enea	Business Agent	29,825.04	1,450.00	2,433.48	33,708.52
Kenneth Friesner	Business Agent	32,474.96	1,450.00	2,701.76	36,626.72
Clarence Johannes	Business Agent	32,474.96	1,450.00	2,630.57	36,555.53
Duane Kraemer	Business Agent	29,825.04	1,450.00	2,673.48	33,948.52
Gerald Sprague	Business Agent	29,825.04	1,450.00	2,013.87	33,288.91
George Lyons	Business Agent	25,816.69	1,450.00	3,311.56	30,578.25
Howard Lewis	Business Agent	16,113.34	1,150.00	2,424.33	19,687.67
Marion Brunner	Secretary	17,157.91			17,157.91
L. Christopher	Secretary	16,792.36			16,792.36
Janice Fatura	Bookkeeper	24,479.71			24,479.71
Jessie Hess	Secretary	15,427.27			15,427.27
Mary Ann Lensby	Secretary	17,433.20			17,433.20
Diane O. Dwyer	Secretary	15,032.84			15,032.84
Ann Lampone	Secretary	15,416.17			15,416.17
Richard Klegin	Maintenance	11,632.51			11,632.51
Amollie Lawrence	Secretary	15,893.55			15,893.55
Bonnie Potter	Secretary	13,565.84			13,565.84
Others		18,413.34		4,546.20	22,959.54
Total -		\$422,231.49	\$ 11,900.00	\$ 27,021.81	\$461,153.30

LABOR ORGANIZATION ANNUAL REPORT
FORM LM-2

MUST BE USED BY LABOR ORGANIZATIONS WITH \$30,000 OR MORE IN RECEIPTS
AND LABOR ORGANIZATIONS WHICH ARE UNDER TRUSTEESHIP

Labor-Management Reporting and Disclosure Act of 1959, as amended
and
Executive Order 11491, as amended

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. SUBMIT THIS REPORT IN DUPLICATE.

<div>RECEIVED U.S. DEPARTMENT OF LABOR LABOR-MANAGEMENT SERVICES ADMINISTRATION MAR 28 1978 JAMES JESINSKI, TREAS TEAMSTERS IND LU 00200 P O BOX 2073 MILWAUKEE WI 53201 1277 L2 M</div>		1. FILE NUMBER 013-815		
2. Period covered From Thru		MO 1 12	DAY 1 31	YR 77 77
3. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE: CITY _____ COUNTY _____ STATE _____				
4. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)		8. OFFICIAL MAILING ADDRESS (For mail to the organization): (In care of) NAME OF PERSON _____		
5. AFFILIATION _____		NUMBER AND STREET _____		
6. DESIGNATION (Local, Lodge, etc.) _____		7. DESIGNATION NUMBER _____		
9. Are organization records kept at the official mailing address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," show address including ZIP Code in Item 22.		BLDG. AND ROOM NUMBER, IF ANY _____		
10. Have any accounts in banks or other financial institutions held in a name other than that of your organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		CITY _____ STATE _____ ZIP CODE _____		
11. Liquidate or reduce any liabilities without disbursement of cash? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		16. A. Was the labor organization insured by a fidelity bond during the reporting period? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No B. If "Yes," enter the maximum amount recoverable for loss caused by any person \$ 215,000		
12. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		17. Enter the date of your organization's next regular election of officers. Month December Year 1979		
13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		AS OF THE END OF THE REPORTING PERIOD:		
14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		18. Were any assets pledged as security or encumbered in any other way? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
15. Discover any loss or shortage of funds or other property? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If the answer to any of the above questions is "Yes," provide details in Item 22. See specific instructions for items answered "Yes.")		19. Did your organization have any contingent liabilities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If the answer to Item 18 or 19 is "Yes," provide details in Item 22.)		
21. List fees and dues required. (Complete each line. Enter "None" or "Not Applicable" as appropriate.)		20. Did your organization have any changes in its constitution and bylaws (other than changed dues amounts) or in practices described in statements submitted with Form LM-1 or Form LM-1A since your organization filed Form LM-1 or most recently updated it by filing a Form LM-1A? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach an updated Form LM-1A to this report, with required documents.		
(1) Initiation fee or fees required from new members _____		(A) If one rate applies, enter here	(B) If more than one rate applies, enter here	
(2) Fees other than dues required from transfer members _____		Minimum \$ 10.00	Maximum \$ 150.00	
(3) Are work permits issued? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," give fees required _____		None		
(4) Regular dues or fees or other periodic payments required to remain a member of the reporting labor organization (per year, mo., etc.) _____		per _____	per _____	
22. ADDITIONAL INFORMATION (If this is a terminal report, see Section XII of the instructions.)		per \$ 12.00 per mo.	per \$ 13.00 per mo.	
Item Number				
9	6200 West Bluemound Road, Milwaukee, WI 53213			
11	Local #200 rents to Milwaukee Area Truck Drivers' Health & Welfare Fund. Local #200 has a loan to the Fund. Instead of exchanging cash, a book entry is made, decreasing liability and increasing income. This year's amount is \$88,038.58.			
14	Milwaukee Area Truck Drivers' Health & Welfare Fund. Teamsters "General" Local #200 Pension Fund.			
15	In June, 1977, \$100.00 was unaccountable.			
(If more space is needed, attach additional sheets with further statement, properly identified.)				
Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law,* that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete.				
75. SIGNED: _____ PRESIDENT (If other title, cross out and write in correct title above. Explain in Item 22.)		76. SIGNED: _____ TREASURER (If other title, cross out and write in correct title above. Explain in Item 22.)		
at: Milwaukee, Wisconsin	on 3/29/78	City	State	Date
Telephone Number (Include Area Code) _____		Telephone Number (Include Area Code) _____		

*See section on "Penalties" in accompanying instructions.

FILL OUT SCHEDULES 1 THROUGH 14 BEFORE
FILLING OUT STATEMENTS A THROUGH C

ENTER AMOUNTS IN DOLLARS ONLY

STATEMENT A—ASSETS AND LIABILITIES

ASSETS		FROM SCH #	Start of Reporting Period (A)		cts	End of Reporting Period (B)		cts	LIABILITIES		FROM SCH #	Start of Reporting Period (C)		cts	End of Reporting Period (D)		cts
Item									Item								
23. (a) Cash on hand (Statement C, lines 1)			\$	1,001	XX	\$	800	XX	32. Accounts Payable			\$	6,011	XX	\$	126	XX
(b) Cash in banks (Statement C, lines 2)				260,400	XX		200,468	XX	33. Loans Payable		8		742,376	XX		579,457	XX
24. Accounts Receivable					XX			XX	34. Mortgages Payable					XX			XX
25. Loans Receivable	1				XX			XX	35. Other Liabilities		4		327,001	XX		238,962	XX
26. U.S. Treasury Securities					XX			XX	36. TOTAL LIABILITIES				\$1,075,388	XX		\$ 818,545	XX
27. Mortgage Investments					XX			XX	NET ASSETS								
28. Other Investments	2			20,550	XX		21,250	XX	37. Net Assets (Item 31 less Item 36)								
29. Fixed Assets	5			2,633,201	XX		2,588,571	XX					\$1,849,653	XX		\$2,002,377	XX
30. Other Assets	3			9,889	XX		9,833	XX									
31. TOTAL ASSETS				\$2,925,041	XX		\$2,820,922	XX									

STATEMENT B—RECEIPTS AND DISBURSEMENTS

CASH RECEIPTS		FROM SCH #	(A)		cts	CASH DISBURSEMENTS		FROM SCH #	(B)		cts
Item						Item					
38. Dues			\$	1,455,273	XX	55. Per Capita Tax			\$	424,402	XX
39. Per Capita Tax					XX	56. Fees, Fines, Assessments, etc.					XX
40. Fees				106,490	XX	57. To Affiliates of Funds Collected on Their Behalf					XX
41. Fines				4,344	XX	58. For Account of Affiliates					XX
42. Assessments					XX	59. To Officers:					
43. Work Permits					XX	(a) Gross		9			
44. On Behalf of Affiliates for Transmittal to Them					XX	(b) Less Deductions				95,278	XX
45. Sale of Supplies				967	XX	60. To Employees:					
46. Interest				7,059	XX	(a) Gross		10			
47. Dividends				1,030	XX	(b) Less Deductions				258,456	XX
48. Rents				213,511	XX	61. Office and Administrative Expense				154,560	XX
49. Loans Obtained	8				XX	62. Educational and Publicity Expense				6,936	XX
50. Sale of Investments and Fixed Assets	7			15,700	XX	63. Professional Fees				7,370	XX
51. Repayment of Loans Made	1				XX	64. Benefits		11		301,949	XX
52. From Members for Disbursement on Their Behalf				1,769	XX	65. Loans Made		1			XX
53. From Other Sources	13			103,994	XX	66. Contributions, Gifts and Grants		12		3,750	XX
54. TOTAL RECEIPTS (Items 38 through 53)				\$1,910,137	XX	67. Supplies for Resale				52,193	XX
						68. Purchase of Investments and Fixed Assets		6		22,982	XX
						69. Direct Taxes				144,981	XX
						70. Withholding Taxes				1,769	XX
						71. On Behalf of Individual Members				162,919	XX
						72. Repayment of Loans Obtained		8		332,725	XX
						73. For Other Purposes		14			XX
						74. TOTAL DISBURSEMENTS (Items 55 through 73)				\$1,970,270	XX

STATEMENT C—CASH

Cash at Start of Reporting Period		(A)	Cash at End of Reporting Period		(B)
1. Cash on Hand		\$ 1,001	1. Cash on Hand		\$ 800
2. Cash in Banks (Checking Accounts and Other Deposits)		260,400	2. Cash in Banks (Checking Accounts and Other Deposits)		200,468
3. Total of Lines 1 and 2		261,401	↓		
4. Total Receipts from Line 54		1,910,137			
5. Total of Lines 3 and 4		2,171,538			
6. Total Disbursements from Line 74		1,970,270			
7. Deduct Line 6 from Line 5		\$ 201,268	3. Total of Lines 1 and 2		\$ 201,268

If the amount entered in line 7, column (A) does not equal the amount entered in line 3, column (B), there is a discrepancy in your reporting. Correct the discrepancy or explain it in Item 22.

If more space is needed to list items in any of the schedules below, continue the list on additional sheets, using the same column headings used on the schedule and enter the totals on the line provided for additional listings on the schedule.

SCHEDULE 1—LOANS RECEIVABLE

List below outstanding loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans, regardless of amount, made to business enterprises. (A)	Loans Outstanding at Start of the Period (B)	Loans Made During the Period (C)	Repayments Received During the Period		Balance at the End of the Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____	\$	\$	\$	\$	\$
2. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____					
3. Totals from Additional Listings, if any.					
4. Totals of Loans not Listed above.					
5. Totals of Lines 1 through 4.	\$	\$	\$	\$	\$

Enter the Totals from Line 5 in Item 25, Column A. Item 65. Item 51. Item 22. Item 25, Column B
with Explanation

SCHEDULE 2—INVESTMENTS OTHER THAN U.S. TREASURY SECURITIES AND MORTGAGE INVESTMENTS

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 2.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	21,250
5. Total Book Value	21,250
6. Itemize each Other Investment holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 5. Also itemize each subsidiary for which separate reports are attached.	
(a) <u>Stock -</u>	
(b) <u>Milwaukee Publishers, Inc.</u>	
(c)	
(d) Total from Additional Listings, if any	
7. Total of Lines 2 and 5.	\$ 21,250
Enter the Total from Line 7 in Item 28, Column B	

SCHEDULE 3—OTHER ASSETS

Description (A)	Book Value (B)
1. Prepaid Expense	\$ 7,788
2. Interest Receivable	2,045
3.	
4.	
5. Total from Additional Listings, if any	
6. Total of Lines 1 through 5.	\$ 9,833
Enter the Total of Line 6 in Item 30, Column B	

SCHEDULE 4—OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. Deferred Rent	\$ 238,962
2.	
3.	
4.	
5.	
6.	
7.	
8. Total from Additional Listings, if any	
9. Total of Lines 1 through 8.	\$ 238,962
Enter the Total from Line 9 in Item 35, Column D	

SCHEDULE 5—FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation (If any) or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (Give Location):	\$		\$	\$
6200 W. Bluemound Rd., Milwaukee	338,769		338,769	530,000
2. Totals from Additional Listings, if any				
3. Buildings (Give Location):	\$			
6200 W. Bluemound Rd.	2,606,494	450,286	2,156,208	
4. Totals from Additional Listings, if any				
5. Automotive Equipment	78,431	15,335	63,096	
6. Office Furniture and Equipment	189,820	159,322	30,498	32,500
7. Other Fixed Assets				
8. Totals of Lines 1 through 7.	\$ 3,213,514	\$ 624,943	\$ 2,588,571	\$ 562,500
Enter the Total from Line 8, column D in Item 29, Column B				

SCHEDULE 6—PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description of Assets (If land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Furniture & Equipment	\$ 13,515	\$ 13,515	\$ 13,515
2. Automobiles	37,978	37,978	37,978
3. Investments	700	700	700
4.			
5. Totals from Additional Listings, if any			
6. Totals of Lines 1 through 5.	\$ 52,193	\$ 52,193	\$ 52,193
Enter the Total from Line 6, Column D in Item 68			

RECEIVED
U.S. DEPARTMENT OF LABOR
LABOR-MANAGEMENT SERVICES
ADMINISTRATION

MAR 28 1978

Assets Traded In on Assets Purchased:	Description of Asset Traded In (A)	Cost (B)	Book Value (C)	Trade-In Allowance (D)
(a) Typewriter		\$ 450	\$ 450	\$ 450
(b)				

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS

Description of Assets Sold (If land or building, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Automobiles	\$ 26,186	\$ 13,082	\$ 15,700	\$ 15,700
2.				
3.				
4. Total from Additional Listings, if any				
5. Totals of Lines 1 through 4.	\$ 26,186	\$ 13,082	\$ 15,700	\$ 15,700
Enter the Total from Line 5, Column E in Item 50				

SCHEDULE 8—LOANS PAYABLE

Source of Loans Payable at any Time During the Reporting Period (A)	Terms for Repayment (B)	Balance at Start of Period (C)	Loans Obtained During Period (D)	Repayment of Loans During Period		Balance at End of Period (F)
				Cash (E)(1)	Other Than Cash (E)(2)	
1. Loans	25 yr.-	\$	\$	\$	\$	\$
2.	8-3/4%	742,376		162,919		579,457
3.						
4.						
5. Total from Additional Listings, if any						
6. Totals of Lines 1 through 5.		\$ 742,376	\$	\$ 162,919	\$	\$ 579,457

Enter the Totals from Line 6 in Item 33, Column C Item 49 Item 72 Item 22, with Explanation Item 33, Column D

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 9—LIST OF ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Name (Important: List all persons who held office during the period) (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. Raymond Fularczyk	President	N	\$ 31,517	\$ 1,450	\$ 863		\$ 33,830
2. James Jesinski	Sec'y-Tr.	C	38,425	1,800	1,937		42,162
3. Ervin Schultz	Vice-Pr.	C	6,168	-	503		6,671
4. William Butler	Rec. Sec.	C	7,231	-	606		7,837
5. James Flanagan	Trustee	C	4,713	-	477		5,190
6. Patrick Clark	"	C	3,825	-	437		4,262
7. Thomas Tucker	"	N	3,165	-	310		3,475
8. Roy Lane	President	P	38,425	1,800	1,980		42,205
9. Harvey Wallerman	Trustee	P	660		219		879
10. Total from Additional Listings, if any.							
11. Totals of Lines 1 through 10.			\$ 134,129	\$ 5,050	\$ 7,332		\$146,511

Code for Column C, "Status": past officer—P; continuing officer—C; new officer during this reporting period—N.

Enter the Total of Line 11, Column H in Item 59(a)

NOTE: If any officer was not elected at a regular election in accordance with the constitution and bylaws, explain in Item 22.

SCHEDULE 10—DISBURSEMENTS TO EMPLOYEES

List below all employees who received more than \$10,000 in gross salary, allowances, and other direct and indirect disbursements from this labor organization and any affiliate. (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. (See Schedule)			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6. Total from Additional Listings, if any							
7. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements.							
8. Totals of Lines 1 through 7.			\$ 361,412	\$ 8,250	\$ 14,590	\$	\$384,252

Enter the Total of Line 8, Column H in Item 60(a)

SCHEDULE 11—BENEFITS

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Out-of-Work	Member	\$ 80,230
2. Pension	Trust	69,791
3. Life Insurance	"	67,549
4. Health & Welfare	"	63,160
5. Sick Dues	Member	19,263
6. Insurance - Other	Trust	1,956
7.		
8.		
9.		
10. Total from Additional Listings, if any		
11. Total of Lines 1 through 10.		\$ 301,949

Enter the Total from Line 11 in Item 64

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS

Type (A)	Amount (B)
1. Labor	\$ 100
2. Education	100
3. Charity	3,550
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 3,750

Enter the Total from Line 11 in Item 66

SCHEDULE 13—OTHER RECEIPTS

Other Sources (A)	Amount (B)
1. Expense Refunds	\$ 15,379
2. Affiliates	88,615
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 103,994

Enter the Total from Line 11 in Item 53

SCHEDULE 14—OTHER DISBURSEMENTS

Other Purposes (A)	Amount (B)
1.	\$
2. (See Schedule)	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$332,725

Enter the Total from Line 11 in Item 73

TEAMSTERS "GENERAL" LOCAL #200

LM-2 Schedule - January 1, 1977 to December 31, 1977

Item 22 - Additional Information:

Line 55 - During the year 1977, \$309,849.55 in Per Capita Tax was paid to the Int'l. Brotherhood of Teamsters. A portion has been allocated as the contribution to the T.A.P.F. in accordance with the T.A.P.F. Agreement and Declaration of Trust.

Line 59 - Raymond Fularczyk was appointed President when Roy Lane resigned.

Line 73 - Automobile Expenses - Bulk purchases of gasoline, insurance and supplies. A proper allocation of the expenses and the individuals to divide by number of business agents and full-time officers proportionately.

Schedule 10 - Disbursements to Employees

Name	Title	Gross Salary	Allow- ance	Reimb'd. Expense	Total
James Bonnet	Business Agent	\$ 28,090	\$1,200	\$ 688	\$ 29,978
Michael Enea	" "	26,500	1,200	1,642	29,342
Kenneth Friesner	" "	27,683	1,200	1,947	30,830
Carence Johannes	" "	29,150	1,200	1,341	31,691
Dane Kraemer	" "	26,500	1,200	1,077	28,777
Donald Sprague	" "	26,500	1,200	1,484	29,184
Leon Brunner	Secretary	18,588	-	-	18,588
John Christopher	"	14,534	-	-	14,534
Janice Fatara	Bookkeeper	23,657	-	-	23,657
Bessie Hess	Secretary	14,736	-	-	14,736
Mary Ann Lensby	"	16,997	-	-	16,997
Lane O'Dwyer	"	13,068	-	-	13,068
Richard Klegin	Bldg. Position	10,326	-	-	10,326
Woline Lawrence	Secretary	13,327	-	-	13,327
Bonnie Potter	"	11,388	-	-	11,388
George Lyons	Business Agent	13,942	950	575	15,467
Ken Lampone	Secretary	10,849	-	-	10,849
Others		35,577	100	5,836	41,513
		\$361,412	\$8,250	\$14,590	\$384,252
		=====	=====	=====	=====

Schedule 14 - Other Disbursements

Overpayment on Check-off	\$ 26	Out-of-town Travel Expense	\$ 15,630
Strike Expense	1,471	Interest	67,861
Refund of Dues and Fees	6,320	Recreational Expense	2,972
Payroll Deductions	32,048	Attendance Bonuses	17,400
Automobile Expense	14,397	Organizing Expense	309
Meeting & Committee Expense	11,436	Void Checks	(163)
Steward Expense	79,408		\$332,725
Building Maintenance	83,610		=====

AMENDED

Form approved
Office of Management & Budget
No. 44R-1132

NOTED

RECEIPTS 16 1077

ended 9, 10, 11, 12, 1, 2, 3, 4, 5, 6

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. SUBMIT THIS REPORT IN DUPLICATE.

*See section on "Penalties" in accompanying instructions.

FILL OUT SCHEDULES 1 THROUGH 14 BEFORE
FILLING OUT STATEMENTS A THROUGH C

ENTER AMOUNTS IN DOLLARS ONLY

STATEMENT A—ASSETS AND LIABILITIES

Item	ASSETS	FROM SCH #	Start of Reporting Period (A)		End of Reporting Period (B)		Item	LIABILITIES	FROM SCH #	Start of Reporting Period (C)		End of Reporting Period (D)	
				cts		cts					cts		cts
23.	(a) Cash on hand (Statement C, lines 1)		\$ 893	XX	\$ 1,001	XX	32.	Accounts Payable		\$	XX	\$ 6,011	XX
	(b) Cash in banks (Statement C, lines 2)		240,788	XX	260,400	XX	33.	Loans Payable	8	769,481	XX	742,376	XX
24.	Accounts Receivable			XX		XX	34.	Mortgages Payable			XX		XX
25.	Loans Receivable	1		XX		XX	35.	Other Liabilities	4	406,742	XX	327,001	XX
26.	U.S. Treasury Securities			XX		XX	36.	TOTAL LIABILITIES		\$1,176,223	XX	\$1,075,388	XX
27.	Mortgage Investments			XX		XX		NET ASSETS					
28.	Other Investments	2	20,550	XX	20,550	XX	37.	Net Assets (Item 31 less Item 36)		\$1,787,552	XX	\$1,849,653	XX
29.	Fixed Assets	5	2,696,070	XX	2,633,201	XX							
30.	Other Assets	3	5,474	XX	9,889	XX							
31.	TOTAL ASSETS		\$2,963,775	XX	\$2,925,041	XX							

STATEMENT B—RECEIPTS AND DISBURSEMENTS

Item	CASH RECEIPTS	FROM SCH #	(A)		Item	CASH DISBURSEMENTS	FROM SCH #	(B)	
				cts					cts
38.	Dues		\$1,205,874	XX	55.	Per Capita Tax		\$ 357,590	XX
39.	Per Capita Tax			XX	56.	Fees, Fines, Assessments, etc.			XX
40.	Fees		77,952	XX	57.	To Affiliates of Funds Collected on Their Behalf			XX
41.	Fines			XX	58.	For Account of Affiliates			XX
42.	Assessments			XX	59.	To Officers:	9		
43.	Work Permits			XX	(a) Gross	\$ 136,037			
44.	On Behalf of Affiliates for Transmittal to Them			XX	(b) Less Deductions	41,653		94,384	XX
45.	Sale of Supplies		316	XX	60.	To Employees:	10		
46.	Interest		9,972	XX	(a) Gross	\$ 407,638		288,021	XX
47.	Dividends		13,129	XX	(b) Less Deductions	119,617		226,078	XX
48.	Rents		226,089	XX	61.	Office and Administrative Expense		2,667	XX
49.	Loans Obtained	8		XX	62.	Educational and Publicity Expense		9,682	XX
50.	Sale of Investments and Fixed Assets	7	21,910	XX	63.	Professional Fees		220,555	XX
51.	Repayment of Loans Made	1		XX	64.	Benefits	11		XX
52.	From Members for Disbursement on Their Behalf		1,808	XX	65.	Loans Made	1		XX
53.	From Other Sources	13	100,588	XX	66.	Contributions, Gifts and Grants	12	3,004	XX
54.	TOTAL RECEIPTS (Items 38 through 53)		\$1,657,638	XX	67.	Supplies for Resale			XX
					68.	Purchase of Investments and Fixed Assets	6	38,011	XX
					69.	Direct Taxes		22,626	XX
					70.	Withholding Taxes		131,155	XX
					71.	On Behalf of Individual Members		1,808	XX
					72.	Repayment of Loans Obtained	8	27,105	XX
					73.	For Other Purposes	14	215,232	XX
					74.	TOTAL DISBURSEMENTS (Items 55 through 73)		\$1,637,918	XX

STATEMENT C—CASH

Cash at Start of Reporting Period			(A)	Cash at End of Reporting Period			(B)
1.	Cash on Hand		\$ 893	1.	Cash on Hand		\$ 1,001
2.	Cash in Banks (Checking Accounts and Other Deposits)		240,788	2.	Cash in Banks (Checking Accounts and Other Deposits)		260,400
3.	Total of Lines 1 and 2		241,681				
4.	Total Receipts from Line 54		1,657,638				
5.	Total of Lines 3 and 4		1,899,319				
6.	Total Disbursements from Line 74		1,637,918				
7.	Deduct Line 6 from Line 5		\$ 261,401	3.	Total of Lines 1 and 2		\$ 261,401

If the amount entered in line 7, column (A) does not equal the amount entered in line 3, column (B), there is a discrepancy in your reporting. Correct the discrepancy or explain it in Item 22.

If more space is needed to list items in any of the schedules below, continue the list on additional sheets, using the same column headings used on the schedule and enter the totals on the line provided for additional listings on the schedule.

SCHEDULE 1—LOANS RECEIVABLE

List below outstanding loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans, regardless of amount, made to business enterprises. (A)	Loans Outstanding at Start of the Period (B)	Loans Made During the Period (C)	Repayments Received During the Period		Balance at the End of the Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____	\$	\$	\$	\$	\$
2. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____					
3. Totals from Additional Listings, if any.					
4. Totals of Loans not Listed above.					
5. Totals of Lines 1 through 4.	\$	\$	\$	\$	\$

Enter the Totals from Line 5 in Item 25, Column A. Item 65. Item 51. Item 22. Item 25, Column B with Explanation

TEAMSTERS "GENERAL" LOCAL #200
LM-2 Schedules - December 31, 1976

Line 22 - Additional Information:

20 This labor organization is not filing Form LM-1A because the only changes in our governing rules were in a uniform Constitution prescribed by our parent body, which is filing the required number of copies; and there have been no changes in practices described in the latest statements submitted with Form LM-1 or Form LM-1A.

An increase of \$2.00 in the dues of all members directed by the 1974 International Convention became effective October 1, 1976. The Local Union chose to increase dues to members on January 1, 1977.

55 During the year 1976, \$248,749.10 in per capita tax was paid to the International Brotherhood of Teamsters. A portion has been allocated as the contribution to the TAPF in accordance with the TAPF Agreement and Declaration of Trust.

60 Schedule 10 - Disbursements to Employees

<u>Name</u>	<u>Position</u>	<u>Gross Salary</u>	<u>Allow- ance</u>	<u>Reimb'd. Expense</u>	<u>Total</u>
James Bonnett	Business Agent	\$ 24,910	\$ 2,700	\$ 2,210	\$ 29,820
Clifford Eils	" "	14,257	700	2,622	17,579
Michael Enea	" "	23,320	1,200	3,116	27,636
Kenneth Friesner	" "	23,320	1,200	3,037	27,557
Raymond Fularczyk	" "	25,970	2,700	2,196	30,866
Fred Hammer	" "	25,970	2,700	3,105	31,775
Clarence Johannes	" "	25,970	2,700	2,738	31,408
Duane Kraemer	" "	22,605	1,200	2,280	26,085
Gerald Sprague	" "	22,605	1,200	2,370	26,175
Marion Brunner	Secretary	13,895	-	-	13,895
L. Christophe	"	13,337	-	-	13,337
Janice Fatura	Bookkeeper	17,022	-	-	17,022
Jessie Hess	Secretary	12,097	-	-	12,097
Marjorie Krueger	"	12,786	-	-	12,786
Mary Ann Lensby	"	13,532	-	-	13,532
Diane O'Dwyer	"	11,578	-	-	11,578
Amoline Lawrence	"	10,401	-	-	10,401
Others		53,654	-	435	54,089
		\$367,229	\$16,300	\$24,109	\$407,638
		=====	=====	=====	=====

SCHEDULE 2—INVESTMENTS OTHER THAN U.S. TREASURY SECURITIES AND MORTGAGE INVESTMENTS

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 2.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	20,550
5. Total Book Value	20,550
6. Itemize each Other Investment holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 5. Also itemize each subsidiary for which separate reports are attached.	
(a) Stock - Milwaukee Publishers, Inc.	
(b)	
(c)	
(d) Total from Additional Listings, if any	
7. Total of Lines 2 and 5.	\$ 20,550
Enter the Total from Line 7 in Item 28, Column B	

SCHEDULE 3—OTHER ASSETS

Description (A)	Book Value (B)
1. Prepaid Expense	\$ 7,883
2. Interest Receivable	2,006
3.	
4.	
5. Total from Additional Listings, if any	
6. Total of Lines 1 through 5.	\$ 9,889
Enter the Total of Line 6 in Item 30, Column B	

SCHEDULE 4—OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. Deferred Rent	\$ 327,001
2.	
3.	
4.	
5.	
6.	
7.	
8. Total from Additional Listings, if any	
9. Total of Lines 1 through 8.	\$ 327,001
Enter the Total from Line 9 in Item 35, Column D	

SCHEDULE 5—FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation (If any) or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (Give Location):	\$		\$	\$
6200 W. Bluemound Road, Milwaukee	338,769		338,769	500,000
2. Totals from Additional Listings, if any				
3. Buildings (Give Location):	\$			
6200 W. Bluemound Road, Milwaukee	2,606,494	391,033	2,215,461	
4. Totals from Additional Listings, if any				
5. Automotive Equipment	66,638	10,988	55,650	
6. Office Furniture and Equipment	176,711	153,390	23,321	30,000
7. Other Fixed Assets				
8. Totals of Lines 1 through 7.	\$3,188,612	\$ 555,411	\$2,633,201	\$ 530,000
Enter the Total from Line 8, column D in Item 29, Column B				

SCHEDULE 6—PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description of Assets (If land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Furniture and Equipment	\$ 3,178	\$ 3,178	\$ 3,178
2. Automotive Equipment	34,833	34,833	34,833
3.			
4.			
5. Totals from Additional Listings, if any			
6. Totals of Lines 1 through 5.	\$ 38,011	\$ 38,011	\$ 38,011
Enter the Total from Line 6, Column D in Item 68			

Description of Asset Traded In (A)	Cost (B)	Book Value (C)	Trade-In Allowance (D)
7. Assets Traded In on Assets Purchased:			
(a)	\$	\$	\$
(b)			

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS

Description of Assets Sold (If land or building, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Automobile	\$ 34,742	\$ 17,481	\$ 21,910	\$ 21,910
2.				
3.				
4. Total from Additional Listings, if any				
5. Totals of Lines 1 through 4.	\$ 34,742	\$ 17,481	\$ 21,910	\$ 21,910
Enter the Total from Line 5, Column E in Item 50				

SCHEDULE 8—LOANS PAYABLE

Source of Loans Payable at any Time During the Reporting Period (A)	Terms for Repayment (B)	Balance at Start of Period (C)	Loans Obtained During Period (D)	Repayment of Loans During Period		Balance at End of Period (F)
				Cash (E)(1)	Other Than Cash (E)(2)	
1. Loan		\$ 769,481	\$	\$ 27,105	\$	\$ 742,376
2.						
3.						
4.						
5. Total from Additional Listings, if any						
6. Totals of Lines 1 through 5.		\$ 769,481	\$	\$ 27,105	\$	\$ 742,376
Enter the Totals from Line 6 in Item 33, Column C Item 49 Item 72 Item 22, with Explanation Item 33, Column D						

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 9—LIST OF ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Name (Important: List all persons who held office during the period) (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. Roy Lane	President	C	\$ 35,245	\$ 3,300	\$ 3,214	\$	\$ 41,759
2. James Jesinski	Sec'y.-Tr.	C	35,245	3,300	3,262		41,807
3. Ervin Schultz	Vice-Pres.	C	5,552	1,500	34		7,086
4. William Butler	Rec. Sec'y.	C	3,808	1,500	361		5,669
5. James Flanagan	Trustee	C	6,776	1,500	933		9,209
6. Harvey Wallerman	"	C	3,335	1,500	451		5,286
7. Patrick Clark	"	N	1,275		70		1,345
8. Frank Ranney	"	P	16,206	1,500	6,170		23,876
9.							
10. Total from Additional Listings, if any.							
11. Totals of Lines 1 through 10.			\$ 107,442	\$ 14,100	\$ 14,495	\$	\$ 136,037

Code for Column C, "Status": past officer—P; continuing officer—C; new officer during this reporting period—N.

Enter the Total of Line 11, Column H in Item 59(a)

NOTE: If any officer was not elected at a regular election in accordance with the constitution and bylaws, explain in Item 22.

SCHEDULE 10—DISBURSEMENTS TO EMPLOYEES

List below all employees who received more than \$10,000 in gross salary, allowances, and other direct and indirect disbursements from this labor organization and any affiliate.		Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
(A)	Position (B)				Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
1. (See Schedule)			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6. Total from Additional Listings, if any							
7. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements.							
8. Totals of Lines 1 through 7.			\$ 367,229	\$ 16,300	\$ 24,109	\$	\$ 407,638

Enter the Total of Line 8, Column H in Item 60(a)

SCHEDULE 11—BENEFITS

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Pension	Trust	\$ 67,544
2. Insurance - Life	"	66,638
3. Insurance - Health	"	
4. and Welfare	"	43,736
5. Insurance - Other	"	198
6. Sick Dues	Local	15,059
7. Out-of-Work	Members	27,380
8.		
9.		
10. Total from Additional Listings, if any		
11. Total of Lines 1 through 10.		\$ 220,555

Enter the Total from Line 11 in Item 64

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS

Type (A)	Amount (B)
1. Charities	\$ 3,004
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 3,004

Enter the Total from Line 11 in Item 66

SCHEDULE 13—OTHER RECEIPTS

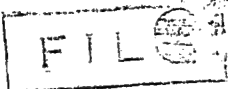
Other Sources (A)	Amount (B)
1. Reimbursed Services	\$ 58,400
2. Strike Benefits - Int'l.	15,200
3. Affiliated Organizations	12,000
4. Expense Refunds	14,969
5. Witness Fee	19
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 100,588

Enter the Total from Line 11 in Item 53

SCHEDULE 14—OTHER DISBURSEMENTS

Other Purposes (A)	Amount (B)
1. Payroll Deductions	\$ 30,115
2. Refund of Dues & Fees	5,795
3. Officers, Delegates & Stewards'	
4. Meeting Expense	76,301
5. Strike	3,849
6. Interest	84,994
7. Attendance Bonuses	14,344
8. Void Check	(166)
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 215,232

Enter the Total from Line 11 in Item 73



LABOR ORGANIZATION ANNUAL REPORT
FORM LM-2

MUST BE USED BY LABOR ORGANIZATIONS WITH \$30,000 OR MORE IN RECEIPTS
AND LABOR ORGANIZATIONS WHICH ARE UNDER TRUSTEESHIP

Labor-Management Reporting and Disclosure Act of 1959, as amended
and
Executive Order 11491, as amended

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. SUBMIT THIS REPORT IN DUPLICATE.

<div>✓</div> <div>JAMES JESINSKI, TREAS TEAMSTERS IND LOCAL #200 P.O. BOX 2073 MILWAUKEE WI 53201 12L2</div>		1. FILE NUMBER <div>013815</div>								
		2. Period covered From Thru <table border="1"><thead><tr><th>MO</th><th>DAY</th><th>YR</th></tr></thead><tbody><tr><td>1</td><td>1</td><td>75</td></tr><tr><td>12</td><td>31</td><td>75</td></tr></tbody></table>		MO	DAY	YR	1	1	75	12
MO	DAY	YR								
1	1	75								
12	31	75								
3. CITY, COUNTY AND STATE, WHERE CHARTERED TO OPERATE: CITY <u>Milwaukee</u> COUNTY <u>Milwaukee</u> STATE <u>Wisconsin</u>										
4. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)		8. OFFICIAL MAILING ADDRESS (For mail to the organization): (In care of) NAME OF PERSON								
5. AFFILIATION		NUMBER AND STREET								
6. DESIGNATION (Local, Lodge, etc.)		7. DESIGNATION NUMBER								
9. Are organization records kept at the official mailing address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," show address including ZIP Code in Item 22.		BLDG. AND ROOM NUMBER, IF ANY								
DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:		16. A. Was the labor organization insured by a fidelity bond during the reporting period? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No B. If "Yes," enter the maximum amount recoverable for loss caused by any person \$ <u>239,000</u>								
10. Have any accounts in banks or other financial institutions held in a name other than that of your organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		17. Enter the date of your organization's next regular election of officers. Month <u>December</u> Year <u>1976</u>								
11. Liquidate or reduce any liabilities without disbursement of cash? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		AS OF THE END OF THE REPORTING PERIOD:								
12. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		18. Were any assets pledged as security or encumbered in any other way? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
13. Acquire any goods or property in any manner other than by purchase or dispose of any goods or property in any manner other than by sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		19. Did your organization have any contingent liabilities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If the answer to Item 18 or 19 is "Yes," provide details in Item 22.)								
14. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries, as defined by section 3(l) of the Act? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		20. Did your organization have any changes in its constitution and bylaws (other than changed dues amounts) or in practices described in statements submitted with Form LM-1 or Form LM-1A since your organization filed Form LM-1 or most recently updated it by filing a Form LM-1A? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach an updated Form LM-1A to this report, with required documents.								
15. Discover any loss or shortage of funds or other property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If the answer to any of the above questions is "Yes," provide details in Item 22. See specific instructions for items answered "Yes.")										
21. List fees and dues required. (Complete each line. Enter "None" or "Not Applicable" as appropriate.)		(A) If one rate applies, enter here (B) If more than one rate applies, enter here								
(1) Initiation fee or fees required from new members		Minimum <u>10.</u> Maximum <u>150.</u>								
(2) Fees other than dues required from transfer members		\$ <u>None</u>								
(3) Are work permits issued? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," give fees required		\$ _____ per _____								
(4) Regular dues or fees or other periodic payments required to remain a member of the reporting labor organization (per year, mo., etc.)		\$ <u>10</u> per <u>mo.</u> \$ <u>11</u> per <u>mo.</u>								
22. ADDITIONAL INFORMATION (If this is a terminal report, see Section XII of the instructions.)										
Item Number										
9	6200 West Bluemound Road, Milwaukee, Wisconsin 53213									
11	Local #200 rents to Milwaukee Area Truck Drivers' Health & Welfare Fund. Local #200 also owes the Fund. Instead of exchanging cash, a book entry is made decreasing liability and increasing income. This year's amount is \$75,461.64.									
14	Milwaukee Area Truck Drivers' Health & Welfare Fund Teamsters' "General" Local #200 Pension Fund									
(If more space is needed, attach additional sheets with further statement, properly identified.)										
Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law,* that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief, true, correct, and complete.										
75. SIGNED: <u>James J. Lane</u> PRESIDENT (If other title, cross out and write in correct title above. Explain in Item 22.)		76. SIGNED: <u>James J. Lane</u> TREASURER (If other title, cross out and write in correct title above. Explain in Item 22.)								
at: <u>Milwaukee, Wisconsin</u> on <u>3/25/76</u> City State Date		at: <u>Milwaukee, Wisconsin</u> on <u>3/25/76</u> City State Date								
<u>414-771-6363</u> Telephone Number (Include Area Code)		<u>414-771-6363</u> Telephone Number (Include Area Code)								

*See section on "Penalties" in accompanying instructions.

ENTER AMOUNTS IN DOLLARS ONLY

STATEMENT A—ASSETS AND LIABILITIES

STATEMENT A—ASSETS AND LIABILITIES

ASSETS		FROM SCH #	Start of Reporting Period (A)	cts	End of Reporting Period (B)	cts	LIABILITIES		FROM SCH #	Start of Reporting Period (C)	cts	End of Reporting Period (D)	cts
23. (a) Cash on hand			\$ 172	XX	\$ 893	XX	32. Accounts Payable			\$	XX	\$	XX
(Statement C, lines 1)							33. Loans Payable	8		515,000	XX	769,481	XX
(b) Cash In banks			260,212	XX	240,788	XX	34. Mortgages Payable ...				XX		XX
(Statement C, lines 2)							35. Other Liabilities	4		477,924	XX	406,742	XX
24. Accounts Receivable ..				XX		XX	36. TOTAL LIABILITIES ..			\$ 992,924	XX	\$ 1,176,223	XX
25. Loans Receivable	1			XX		XX							
26. U.S. Treasury Securities				XX		XX							
27. Mortgage Investments.				XX		XX							
28. Other Investments ...	2		20,550	XX	20,550	XX							
29. Fixed Assets	5		2,368,001	XX	2,696,070	XX							
30. Other Assets	3			XX	5,474	XX							
31. TOTAL ASSETS			2,648,935	XX	2,963,775	XX							
							NET ASSETS						
							37. Net Assets (Item 31						
							less Item 36)			1,656,011	XX	1,787,552	XX

STATEMENT B—RECEIPTS AND DISBURSEMENTS

Item	CASH RECEIPTS	FROM SCH #	(A)	cts	Item	CASH DISBURSEMENTS	FROM SCH #	(B)	cts
38. Dues			\$1,201,083	XX	55. Per Capita Tax			\$ 349,410	XX
39. Per Capita Tax				XX	56. Fees, Fines, Assessments, etc.				XX
40. Fees			51,676	XX	57. To Affiliates of Funds Collected on Their Behalf				XX
41. Fines				XX	58. For Account of Affiliates				XX
42. Assessments			2,781	XX	59. To Officers:		9		
43. Work Permits				XX	(a) Gross	\$ 96,532			
44. On Behalf of Affiliates for Transmittal to Them				XX	(b) Less Deductions	36,346		60,186	XX
45. Sale of Supplies			392	XX	60. To Employees:		10		
46. Interest			14,759	XX	(a) Gross	\$ 364,779			
47. Dividends			25,784	XX	(b) Less Deductions	109,360		255,419	XX
48. Rents			195,182	XX	61. Office and Administrative Expense			132,801	XX
49. Loans Obtained	8		265,000	XX	62. Educational and Publicity Expense			1,866	XX
50. Sale of Investments and Fixed Assets	7		14,500	XX	63. Professional Fees			7,640	XX
51. Repayment of Loans Made	1			XX	64. Benefits		11	178,654	XX
52. From Members for Disbursement on Their Behalf			6,958	XX	65. Loans Made		1		XX
53. From Other Sources	13		92,643	XX	66. Contributions, Gifts and Grants		12	2,000	XX
54. TOTAL RECEIPTS (Items 38 through 53)			\$1,870,758	XX	67. Supplies for Resale				XX
					68. Purchase of Investments and Fixed Assets		6	423,200	XX
					69. Direct Taxes			22,155	XX
					70. Withholding Taxes			145,706	XX
					71. On Behalf of Individual Members			6,958	XX
					72. Repayment of Loans Obtained		8	10,519	XX
					73. For Other Purposes		14	292,947	XX
					74. TOTAL DISBURSEMENTS (Items 55 through 73)			\$1,889,461	XX

STATEMENT C—CASH

Cash at Start of Reporting Period		(A)	Cash at End of Reporting Period		(B)
1. Cash on Hand	\$	172	1. Cash on Hand	\$	893
2. Cash in Banks (Checking Accounts and Other Deposits)		260,212	2. Cash in Banks (Checking Accounts and Other Deposits)		240,788
3. Total of Lines 1 and 2		260,384			↓
4. Total Receipts from Line 54		1,870,758			
5. Total of Lines 3 and 4		2,131,142			
6. Total Disbursements from Line 74		1,889,461			
7. Deduct Line 6 from Line 5	\$	241,681	3. Total of Lines 1 and 2	\$	241,681

If more space is needed to list items in any of the schedules below, continue the list on additional sheets, using the same column headings used on the schedule and enter the totals on the line provided for additional listings on the schedule.

SCHEDULE 1—LOANS RECEIVABLE

List below outstanding loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans, regardless of amount, made to business enterprises. (A)	Loans Outstanding at Start of the Period (B)	Loans Made During the Period (C)	Repayments Received During the Period		Balance at the End of the Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
2. (Name) _____ (Purpose) _____ (Security) _____ (Terms of Repayment) _____					
3. Totals from Additional Listings, if any.					
4. Totals of Loans not Listed above.					
5. Totals of Lines 1 through 4.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Enter the Totals from Line 5 in . . . Item 25, Column A. . . Item 65. . . Item 51. . . Item 22, with Explanation . . . Item 25, Column B

SCHEDULE 2—INVESTMENTS OTHER THAN U.S. TREASURY SECURITIES AND MORTGAGE INVESTMENTS

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 2.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	20,550
5. Total Book Value	20,550
6. Itemize each Other Investment holding which is valued at over \$1000 and which is also greater than 20% of the amount given in Line 5. Also itemize each subsidiary for which separate reports are attached.	
(a) <u>Stock - Milwaukee Publishers</u>	20,550
(b)	
(c)	
(d) Total from Additional Listings, if any	
7. Total of Lines 2 and 5.	\$ 20,550
Enter the Total from Line 7 in Item 28, Column B	

SCHEDULE 3—OTHER ASSETS

Description (A)	Book Value (B)
1. Prepaid Insurance	\$ 5,115
2. Interest Receivable	359
3.	
4.	
5. Total from Additional Listings, if any	
6. Total of Lines 1 through 5.	\$ 5,474
Enter the Total of Line 6 in Item 30, Column B	

SCHEDULE 4—OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. Deferred Rent	\$ 402,462
2. Accrued Expense	4,280
3.	
4.	
5.	
6.	
7.	
8. Total from Additional Listings, if any	
9. Total of Lines 1 through 8.	\$ 406,742
Enter the Total from Line 9 in Item 35, Column D	

SCHEDULE 5—FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation (If any) or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (Give Location):	\$		\$	\$
6200 West Bluemound Road, Milwaukee, WI	338,769		338,769	
2. Totals from Additional Listings, if any				
3. Buildings (Give Location):		\$		
Same	2,606,494	331,780	2,274,714	
4. Totals from Additional Listings, if any				
5. Automotive Equipment	66,548	11,886	54,662	
6. Office Furniture and Equipment	174,707	146,781	27,926	
7. Other Fixed Assets				
8. Totals of Lines 1 through 7.	\$ 3,186,518	\$ 490,447	\$2,696,071	\$
Enter the Total from Line 8, column D in Item 29, Column B				

SCHEDULE 6—PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description of Assets (If land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Furniture and Equipment	\$ 2,025	\$ 2,025	\$ 2,025
2. Automotive Equipment	33,196	39,192	33,196
3. Building - 6200 W. Bluemound Rd.	387,979	387,979	387,979
4.			
5. Totals from Additional Listings, if any			
6. Totals of Lines 1 through 5.	\$ 423,200	\$ 429,196	\$ 423,200
Enter the Total from Line 6, Column D in Item 68			

7. Assets Traded In on Assets Purchased:	Cost (B)	Book Value (C)	Trade-In Allowance (D)
Description of Asset Traded In (A)			
(a) <u>Automobile</u>	\$ 9,506	\$ 5,757	\$ 5,996
(b)			

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS

Description of Assets Sold (If land or building, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Furniture and Equipment	\$ 500	\$ 250	\$ 250	\$ 250
2. Automobile	16,791	10,089	14,250	14,250
3.				
4. Total from Additional Listings, if any				
5. Totals of Lines 1 through 4.	\$ 17,291	\$ 10,339	\$ 14,500	\$ 14,500
Enter the Total from Line 5, Column E in Item 50				

SCHEDULE 8—LOANS PAYABLE

Source of Loans Payable at any Time During the Reporting Period (A)	Terms for Repayment (B)	Balance at Start of Period (C)	Loans Obtained During Period (D)	Repayment of Loans During Period		Balance at End of Period (F)
				Cash (E)(1)	Other Than Cash (E)(2)	
1. Loans		\$ 515,000	\$ 265,000	\$ 10,519	\$	\$ 769,481
2.						
3.						
4.						
5. Total from Additional Listings, if any						
6. Totals of Lines 1 through 5.		\$ 515,000	\$ 265,000	\$ 10,519	\$	\$ 769,481

Enter the Totals from Line 6 in Item 33, Column C Item 49 Item 72 Item 22, with Explanation Item 33, Column D

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 9—LIST OF ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Name (Important: List all persons who held office during the period)	Title	Status	Gross Salary (before taxes and other deductions)	Allowances	Other Direct and Indirect Disbursements		Total
					Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
1. Roy Lane	President	C	\$ 31,670	\$ 2,300	\$ 437	\$	\$ 34,407
2. James Jesinski	Sec. Treas.	C	31,670	2,300	189		34,159
3. Ervin Schultz	Vice-Pres.	C	4,573		80		4,653
4. William Butler	Rec. Sec'y.	C	3,240		122		3,362
5. Frank Ranney	Trustee	C	13,822				13,822
6. James Flanagan	"	C	2,940		168		3,108
7. Harvey Wallerman	"	C	2,940		81		3,021
8.							
9.							
10. Total from Additional Listings, if any.							
11. Totals of Lines 1 through 10.			\$ 90,855	\$ 4,600	\$ 1,077	\$	\$ 96,532

Code for Column C, "Status": past officer—P; continuing officer—C; new officer during this reporting period—N.

Enter the Total of Line 11, Column H in Item 59(a)

NOTE: If any officer was not elected at a regular election in accordance with the constitution and bylaws, explain in Item 22.

SCHEDULE 10—DISBURSEMENTS TO EMPLOYEES

List below all employees who received more than \$10,000 in gross salary, allowances, and other direct and indirect disbursements from this labor organization and any affiliate.		Name of Affiliated Organization (if applicable)	Gross Salary (before taxes and other deductions)	Allowances	Other Direct and Indirect Disbursements		Total
(A)	Position (B)				Expenses Including Reimbursed Expenses (F)	Other Disbursements (G)	
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
1.			\$	\$	\$	\$	\$
2.							
3. (See Schedule)							
4.							
5.							
6. Total from Additional Listings, if any							
7. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements.							
8. Totals of Lines 1 through 7.			\$ 352,211	\$ 11,500	\$ 1,068	\$	\$ 364,779

Enter the Total of Line 8, Column H in Item 60(a)

SCHEDULE 11—BENEFITS

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Pension		\$ 59,948
2. Group Life Insurance		66,378
3. Health & Welfare		34,709
4. Other		613
5. Sick Dues		17,006
6.		
7.		
8.		
9.		
10. Total from Additional Listings, if any		
11. Total of Lines 1 through 10.		\$ 178,654

Enter the Total from Line 11 in Item 64

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS

Type (A)	Amount (B)
1. Contribution - Charity	\$ 2,000
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 2,000

Enter the Total from Line 11 in Item 66

SCHEDULE 13—OTHER RECEIPTS

Other Sources (A)	Amount (B)
1. Receipts from Affiliates	\$ 87,780
2. Expense Refunds	4,852
3. Court Fees	11
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from Additional Listings, if any	
11. Total of Lines 1 through 10.	\$ 92,643

Enter the Total from Line 11 in Item 53

SCHEDULE 14—OTHER DISBURSEMENTS

Other Purposes (A)	Amount (B)
1. Refund of Fees and Dues	\$ 5,700
2. Organizing	385
3. Meeting & Committee	13,762
4. Steward	63,834
5. Automobile	30,296
6. Building Maintenance	68,144
7. Travel	6,786
8. Interest	86,128
9. Recreation	3,392
10. Attendance Bonus	14,520
11. Total of Lines 1 through 10.	\$ 292,947

Enter the Total from Line 11 in Item 73

TEAMSTERS' "GENERAL" LOCAL #20
LM-2 Schedule - December 31, 1977

Schedule 10 - Disbursements to Employees

Name	Title	Status	Gross Salary	Allowances	Reimburse Expense	Total
James Bonnett	Bus. Agent		\$ 22,526.67	\$ 1,200.00	\$ 44.60	\$ 23,772.27
Clifford Eils	" "		22,526.67	1,200.00	149.60	23,876.27
Michael Enea	" "		20,936.67	1,200.00	47.06	22,184.07
Kenneth Friesner	" "		20,936.67	1,200.00	193.18	22,329.85
Raymond Fularczyk	" "		23,586.71	1,200.00	98.00	24,884.71
Fred Hammer	" "		23,586.71	1,200.00	57.65	24,844.36
Clarence Johannes	" "		23,586.71	1,200.00	-	24,786.71
Duane Kraemer	" "		17,433.35	1,200.00	12.06	18,645.41
Charles Scott	" "		11,071.69	700.00	-	11,771.69
Gerald Sprague	" "		17,433.35	1,200.00	72.09	18,705.44
Marion Brunner	Secretary		11,909.27	-	-	11,909.27
L. Christopher	"		11,909.27	-	-	11,909.27
Janice Fatura	Bookkeeper		14,472.82	-	-	14,472.82
Jessie Hess	Secretary		10,296.23	-	-	10,296.23
Marjorie Kuchler	"		11,371.62	-	-	11,371.62
Mary Ann Lensby	"		12,359.81	-	-	12,359.81
Diane O'Dwyer	"		10,192.84	-	-	10,192.84
Duane Smith	Controller		14,850.02	-	-	14,850.02
Others below \$10,000			51,223.78	-	393.00	51,616.78
			<u>\$352,210.86</u>	<u>\$11,500.00</u>	<u>\$1,068.53</u>	<u>\$364,779.39</u>
			=====	=====	=====	=====

LABOR ORGANIZATION ANNUAL REPORT
FORM LM-2

Form approved by Bureau of the Budget
No. 44-R1132.1

READ INSTRUCTIONS CAREFULLY BEFORE PREPARING REPORT

1. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)

Teamsters' "General" Local #200

4.a. AFFILIATION

International Brotherhood of Teamsters

4.b. UNIT DESIGNATION (Local, Lodge, etc.)

Local

4.c. UNIT NUMBER

200

2. PERIOD
COVERED
BY THIS
REPORT

	Month	Day	Year
From:	1	1	74
Thru:	12	31	74

3. LM FILE NO.

013815 - 6

5. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE.

Milwaukee

CITY

Milwaukee

COUNTY

WI

STATE

6. MAILING ADDRESS:
(for official mail to the Union)

(in care of) NAME OF PERSON

Mr. James Jesinski

CITY

Milwaukee

NUMBER AND STREET

Post Office Box 2073

STATE

Wisconsin

ZIP CODE

53201

7. Are records kept at address listed in Item 6? If "NO", give address in Item 18.

☐ YES ☒ NO

DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:

- | | | |
|---|-------------------------------------|-------------------------------------|
| 8. Have any accounts in banks or other financial institutions held in a name other than that of your organization? | Yes | No |
| 9. Liquidate or reduce any liabilities without disbursement of cash? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11. Acquire any goods or property in any manner other than by purchase or dispose of such property in any manner other than by sale? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries as defined by Section 3(l) of the Act? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

INDICATE BELOW ANY CHANGES IN THE LABOR ORGANIZATION INFORMATION REPORT (LM-1) WHICH HAVE NOT BEEN PREVIOUSLY REPORTED

- | | | |
|--|-------------------------------------|-------------------------------------|
| 13. Does the address in Item 6 represent a change? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 14. Has there been a change in officers? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 15. Have there been any other changes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

AS OF THE END OF THE REPORTING PERIOD:

- | | | |
|---|--------------------------|-------------------------------------|
| 16. Were any assets pledged as security or encumbered in any other way? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 17. Did your organization have any contingent liabilities? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

(If the answer to any of the above questions, other than 13 and 14, is "Yes," details must be provided in Item 18 below. See specific instructions for items which have been answered "Yes.")

Item No.	18. ADDITIONAL INFORMATION
7	6200 West Bluemound Road, Milwaukee, WI 53213
9	Local #200 rents to Milwaukee Area Truck Drivers' Health and Welfare Fund. Local #200 also owes the Fund. Instead of exchanging cash a book entry is made decreasing the liability and increasing income in the amount of \$150,923.28.
12	Milwaukee Area Truck Drivers' Health and Welfare Fund. Teamsters' "General" Local #200 Pension Fund.
15	An increase of \$1.00 in the dues of all members directed by the July 1971 International Convention became effective January 1, 1974.

RECEIVED
U.S. DEPARTMENT OF LABOR
LABOR-MANAGEMENT SERVICES
ADMINISTRATION

MAR 27 1975

AM
7 8 9 10 11 12 1 2 3 4 5 6 PM

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned officers of the above labor organization declares that he is the officer required to sign this report and that the information contained in this report and any accompanying documents, is to the best of his knowledge and belief, true, correct, and complete.

71. SIGNED: Ray C. Lane
at: Milwaukee, WI on: 3/21/75
City State Date
(If other title, cross out and write in correct title above.)
PRESIDENT

72. SIGNED: [Signature]
at: Milwaukee, WI on: 3/21/75
City State Date
(If other title, cross out and write in correct title above.)
TREASURER

SCHEDULE 2—OTHER INVESTMENTS (See Instructions, Item 25)

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding over \$1,000 where book value exceeds 20% of the total on line 2 above.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	20 550
5. Total Book Value	20 550
6. Itemize each Other Investment holding over \$1,000 where book value exceeds 20% of the total on line 5 above.	
(a) Milwaukee Publishers, Inc.	
(b) Stock	
(c)	
(d)	
7. Total of lines 2 and 5	\$ 20 550
(Enter the total in Item on page 2 as shown)25	

SCHEDULE 3—OTHER ASSETS (See Instructions, Item 27)

Description (A)	Book Value (B)
1.	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$
(Enter the total in Item on page 2 as shown)27	
SCHEDULE 4—OTHER LIABILITIES (See Instructions, Item 32)	
Description (A)	Amount at End of Period (B)
1. Deferred Rent-MATD Health	\$
2. and Welfare Fund	477 924
3.	
4.	
5.	
6.	
7.	
8.	
9. Total of lines 1 through 8	\$ 477 924
(Enter the total in Item on page 2 as shown)32	

SCHEDULE 5—FIXED ASSETS (See Instructions, Item 26)

Description (A)	Cost or Other Basis (B)	Total Depreciation (if any) (C)	Book Value (D)
1. Land (Give Location): 6200 West Bluemound Rd., Milwaukee, WI 53213	\$ 338 769		\$ 338 769
2. Buildings (Give Location): Same	1 424 658	279 172	1 145 486
3. Automotive Equipment	53 652	7 283	46 369
4. Office Furniture and Equipment	173 182	129 662	43 520
5. Other Fixed Assets - Construction in Progress	793 857		793 857
6. Totals of lines 1 through 5	\$ 2 784 118	\$ 416 117	\$ 2 368 001
(Enter the total of column (D) in Item on page 2 as shown)26			

SCHEDULE 6—LOANS PAYABLE

Source (A)	Arrangements For Repayment (B)	Loans Obtained During Period (C)	Repayment of Loans During Period (D)	Balance at End of Period (E)
1. Heritage Bank of Milwaukee		\$ 515 000	\$	\$ 515 000
2.				
3.				
4.				
5. Total from Additional Listings, if any				
6. Totals of lines 1 through 5		\$ 515 000	\$	\$ 515 000
(Enter the totals of columns (C), (D), and (E) in Items on page 2 as shown)46.....68.....30				

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 47)

Description of Assets Sold (If Land or Building, Give Location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. State of Israel Bonds	\$ 50 000	\$ 50 000	\$ 50 000	\$ 50 000
2. Sale of Automobiles	37 745	19 991	21 300	21 300
3.				
4.				
5. Totals of lines 1 through 4	\$ 87 745	\$ 69 991	\$ 71 300	\$ 71 300
(Enter the total of column (E) in Item on page 2 as shown)47				

STATEMENT OF ASSETS AND LIABILITIES

STATEMENT OF RECEIPTS AND DISBURSEMENTS

SCHEDULE 1—LOANS RECEIVABLEForm LM-2 (Rev. 6/69) Page 2

SCHEDULE 8—DISBURSEMENTS TO OFFICERS (See Instructions, Item 56)

Name (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1. See Schedule			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6.							
7. Total from Additional Listings, if any							
8. Totals of lines 1 through 7			\$ 86,290	\$ 14,000	\$ 698	\$	\$ 100,988

(Enter the total of column (H) in Item on page 2 as shown)56(a)

SCHEDULE 9—DISBURSEMENTS TO EMPLOYEES (See Instructions, Item 57)

Name (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$	\$	\$	\$	\$
2.							
3.							
4.							
5. Total from Additional Listings, if any							
6. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements							
7. Totals of lines 1 through 6			\$ 352,204	\$ 14,700	\$ 598	\$	\$ 367,500

(Enter the total of column (H) in Item on page 2 as shown)57(a)

SCHEDULE 10—PURCHASE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 65)

Description of Assets (if land or buildings, give location) (A)	Book Value (B)	Amount Paid (C)
1. Equipment	\$ 2,565	\$ 2,565
2. Automobiles	34,742	34,742
3. Construction in Progress - Addition at 6200 W. Bluemound Rd.	793,857	793,857
4.		
5.		
6. Totals of lines 1 through 5	\$ 831,164	\$ 831,164

(Enter the total of column (C) in Item on page 2 as shown)65

SCHEDULE 11—BENEFITS (See Instructions, Item 61)

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
Other		100
1. Pension		\$ 57,222
2. Insurance-Group Life		86,850
3. " -Health & Welfare		30,034
4. Sick Dues		16,652
5. Total of lines 1 through 4		\$ 190,858

(Enter the total in Item on page 2 as shown)61

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS
(See Instructions, Item 63)

Type (A)	Amount (B)
1. Charities	\$ 2,739
2. Educational	700
3.	
4.	
5. Total of lines 1 through 4	\$ 3,439

(Enter the total in Item on page 2 as shown)63

SCHEDULE 13—OTHER RECEIPTS (See Instructions, Item 50)

Other Sources (A)	Amount (B)
1. Receipts from Affiliates	\$ 42,276
2. Refund of Expenses	11,988
3. Reimbursed Services	60,000
4.	
5.	
6. Total of lines 1 through 5	\$ 114,264

(Enter the total in Item on page 2 as shown)50

SCHEDULE 14—OTHER DISBURSEMENTS (See Instructions, Item 69)

Other Purposes (A)	Amount (B)
1. See Schedule	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$ 365,614

(Enter the total in Item on page 2 as shown)69

LM-2 Schedules - December 31, 1974

Schedule 8 - Disbursements to Officers

Name	Title	Status	Gross Salary	Allowance	Reimb'd. Expense	Total
Roy Lane	President	C	\$ 30,620.00	\$ 7,000.00	\$238.75	\$ 37,858.75
James Jesinski	Sec'y. Treas.	C	30,620.00	7,000.00	-	37,620.00
Ervin Schultz	Vice-Pres.	C	2,710.00	-	-	2,710.00
William Butler	Rec. Sec'y.	C	3,010.00	-	-	3,010.00
Frank H. Ranney	Trustee	C	12,909.98	-	-	12,909.98
James Flanagan	"	C	3,710.00	-	459.18	4,169.18
Harvey Wallerman	"	C	2,710.00	-	-	2,710.00
			<u>\$ 86,289.98</u>	<u>\$14,000.00</u>	<u>\$697.93</u>	<u>\$100,987.91</u>

Schedule 9 - Disbursements to Employees

Name	Title	Status	Gross Salary	Allowance	Reimb'd. Expense	Total
Clarence Johannes	Bus. Agent		\$ 22,670.00	\$ 1,200.00	\$ 10.00	\$ 23,880.00
Fred Hammer	" "		22,670.00	1,200.00	118.67	23,988.67
Charles Scott	" "		18,695.00	1,200.00	-	19,895.00
Raymond Fularczyk	" "		22,670.00	1,200.00	24.35	23,894.35
Kenneth Friesner	" "		20,020.02	1,200.00	22.70	21,242.72
James Bonnett	" "		21,610.02	1,200.00	36.80	22,846.82
Clifford Eils	" "		21,610.02	1,200.00	202.15	23,012.17
Michael Enea	" "		18,305.00	1,200.00	5.77	19,510.77
Duane Smith	Controller		12,378.40	-	-	12,378.40
Janice Fatura	Bookkeeper		13,429.04	-	-	13,429.04
Marion Brunner	Secretary		11,360.80	-	-	11,360.80
L. Christopher	"		11,360.80	-	-	11,360.80
Mary Ann Lensby	"		11,360.80	-	-	11,360.80
Marjorie Kuchler	"		10,198.97	-	-	10,198.97
Employees who received Less than \$10,000.00			<u>113,865.59</u>	<u>5,100.00</u>	<u>175.34</u>	<u>119,140.93</u>
			<u>\$352,204.46</u>	<u>\$14,700.00</u>	<u>\$595.78</u>	<u>\$367,500.24</u>

Schedule 14 - Other Disbursements

Refund of Dues and Initiation Fees	\$ 5,799.50
Organizing Expense	308.89
Meeting and Committee Expense	16,320.22
Stewards' Expense	56,048.06
Automobile Expense	29,083.70
Building Maintenance	55,445.86
Travel Expense	5,934.13
Interest	35,640.56
Recreation Expense	4,174.80
Meeting Attendance Bonus	17,680.00
Payroll Taxes - Deductions Paid	<u>139,177.96</u>
	<u>\$365,613.68</u>

LABOR ORGANIZATION ANNUAL REPORT

FORM LM-2

Form approved by Bureau of the Budget
No. 44 R1132.1

1296

1. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.) Teamsters "General" Local #200		2. PERIOD COVERED BY THIS REPORT From: Month 1 Day 1 Year 73 Thru: Month 12 Day 31 Year 73		3. LM FILE NO. 013815-60
4.a. AFFILIATION I. B. of T. C. W. & H. of A.		5. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE. Milwaukee Milwaukee WI CITY COUNTY STATE		
4.b. UNIT DESIGNATION (Local, Lodge, etc.) Local		4.c. UNIT NUMBER 200		
6. MAILING ADDRESS: (for official mail to the Union)		NAME OF PERSON Mr. James Jesinski		
		NUMBER AND STREET Post Office Box 2073		
		CITY STATE ZIP CODE Milwaukee Wisconsin 53201		

7. Are records kept at address listed in Item 6? If "NO", give address in Item 18.

☐ YES ☒ NO

DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:

8. Have any accounts in banks or other financial institutions held in a name other than that of your organization? ☐ Yes ☒ No
9. Liquidate or reduce any liabilities without disbursement of cash? ☒ Yes ☐ No
10. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? ☐ Yes ☒ No
11. Acquire any goods or property in any manner other than by purchase or dispose of such property in any manner other than by sale? ☒ Yes ☐ No
12. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries as defined by Section 3(l) of the Act? ☒ Yes ☐ No

INDICATE BELOW ANY CHANGES IN THE LABOR ORGANIZATION INFORMATION REPORT (LM-1) WHICH HAVE NOT BEEN PREVIOUSLY REPORTED

13. Does the address in Item 6 represent a change? ☐ Yes ☒ No
14. Has there been a change in officers? ☐ Yes ☒ No
15. Have there been any other changes? ☐ Yes ☒ No

AS OF THE END OF THE REPORTING PERIOD:

16. Were any assets pledged as security or encumbered in any other way? ☐ Yes ☒ No
17. Did your organization have any contingent liabilities? ☐ Yes ☒ No

(If the answer to any of the above questions, other than 13 and 14, is "Yes," details must be provided in Item 18 below. See specific instructions for items which have been answered "Yes.")

Item No.	18. ADDITIONAL INFORMATION
7	6200 West Bluemound Road, Milwaukee, Wisconsin 53213
9	Local #200 rents to Milwaukee Area Truck Drivers' Health and Welfare Fund. Local #200 also owes the Fund. Instead of exchanging cash a book entry is made decreasing the liability and increasing income in the amount of \$150,923.28.
11	Through the merger of Teamsters' Locals #225 and #257 with Local #200 on February 1, 1973, Local #200 acquired assets valued at \$55,210.74, made up as follows: Land - \$6,000.00, Building (Net) - \$28,067.00, Furniture and Equipment (Net) - \$6,436.91, Cash - \$11,861.83, Investment - \$3,600.00 and Liabilities - \$755.00
12	Milwaukee Area Truck Drivers' Health and Welfare Fund.
12	Teamsters "General" Local #200 Pension Fund.

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned officers of the above labor organization declares that he is the officer required to sign this report and that the information contained in this report and any accompanying documents, is to the best of his knowledge and belief, true, correct, and complete.

71. SIGNED: *Ray C Lane*
at: Milwaukee, WI on: 3/22/74
City State Date

PRESIDENT
(If other title, cross out and write in correct title above.)

72. SIGNED: *James Jesinski*
at: Milwaukee, WI on: 3/20/74
City State Date

TREASURER
(If other title, cross out and write in correct title above.)

STATEMENT OF ASSETS AND LIABILITIES

STATEMENT OF RECEIPTS AND DISBURSEMENTS

SCHEDULE 1—LOANS RECEIVABLEForm LM-2 (Rev. 6/69) Page 2

SCHEDULE 2—OTHER INVESTMENTS (See Instructions, Item 25)

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding over \$1,000 where book value exceeds 20% of the total on line 2 above.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	70 550
5. Total Book Value	70 550
6. Itemize each Other Investment holding over \$1,000 where book value exceeds 20% of the total on line 5 above.	
(a) State of Israel Bonds	50 000
(b) Milwaukee Publishers, Inc.	20 550
(c)	
(d)	
7. Total of lines 2 and 5	\$ 70 550
(Enter the total in Item on page 2 as shown) 25	

SCHEDULE 3—OTHER ASSETS (See Instructions, Item 27)

Description (A)	Book Value (B)
1.	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$
(Enter the total in Item on page 2 as shown) 27	
SCHEDULE 4—OTHER LIABILITIES (See Instructions, Item 32)	
Description (A)	Amount at End of Period (B)
1. Deferred Rent-Health & Welfare	\$
2. Fund	628 847
3.	
4.	
5.	
6.	
7.	
8.	
9. Total of lines 1 through 8	\$ 628 847
(Enter the total in Item on page 2 as shown) 32	

SCHEDULE 5—FIXED ASSETS (See Instructions, Item 26)

Description (A)	Cost or Other Basis (B)	Total Depreciation (if any) (C)	Book Value (D)
1. Land (Give Location): 6200 West Bluemound Road, Milwaukee, WI	\$ 338 769		\$ 338 769
2. Buildings (Give Location): Same	1 424 658	243 555	1 181 103
3. Automotive Equipment	56 655	12 512	44 143
4. Office Furniture and Equipment	170 617	112 372	58 245
5. Other Fixed Assets			
6. Totals of lines 1 through 5	\$ 1 990 699	\$ 368 439	\$ 1 622 260
(Enter the total of column (D) in Item on page 2 as shown) 26			

SCHEDULE 6—LOANS PAYABLE

Source (A)	Arrangements For Repayment (B)	Loans Obtained During Period (C)	Repayment of Loans During Period (D)	Balance at End of Period (E)
1.		\$	\$	\$
2.				
3.				
4.				
5. Total from Additional Listings, if any				
6. Totals of lines 1 through 5		\$	\$	\$
(Enter the totals of columns (C), (D), and (E) in Items on page 2 as shown) 46 68 30				

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 47)

Description of Assets Sold (If Land or Building, Give Location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Land and Building from Merger	\$ 35 917	\$ 33 522	\$ 40 947	\$ 40 947
2. Automobiles	22 348	10 733	9 000	9 000
3. Furniture, Fixtures & Office Equipment	400	130	145	145
4.				
5. Totals of lines 1 through 4	\$ 58 665	\$ 44 385	\$ 50 092	\$ 50 092
(Enter the total of column (E) in Item on page 2 as shown) 47				

SCHEDULE 8—DISBURSEMENTS TO OFFICERS (See Instructions, Item 56)

Name (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$	\$	\$	\$	\$
2. See Schedule							
3.							
4.							
5.							
6.							
7. Total from Additional Listings, if any							
8. Totals of lines 1 through 7			\$ 79,805	\$ 5,200	\$ 580		\$ 85,585

(Enter the total of column (H) in Item on page 2 as shown)56(a)

SCHEDULE 9—DISBURSEMENTS TO EMPLOYEES (See Instructions, Item 57)

Name (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$	\$	\$	\$	\$
2. See Schedule							
3.							
4.							
5. Total from Additional Listings, if any							
6. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements							
7. Totals of lines 1 through 6			\$ 336,475	\$ 13,900	\$ 1,545		\$ 351,920

(Enter the total of column (H) in Item on page 2 as shown)57(a)

SCHEDULE 10—PURCHASE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 65)

Description of Assets (if land or buildings, give location) (A)	Book Value (B)	Amount Paid (C)
1. State of Israel Bonds	\$ 50,000	\$ 50,000
2. Automobiles	30,621	30,621
3. Furniture, Fixtures and Office Equipment	3,585	3,585
4.		
5.		
6. Totals of lines 1 through 5	\$ 84,206	\$ 84,206

(Enter the total of column (C) in Item on page 2 as shown)65

SCHEDULE 11—BENEFITS (See Instructions, Item 61)

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Insurance		\$ 113,143
2. Pension		46,876
3. Sick Benefits		14,290
4. Strike		1,176
5. Total of lines 1 through 4		\$ 175,485

(Enter the total in Item on page 2 as shown)61

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS
(See Instructions, Item 63)

Type (A)	Amount (B)
1. Local Charities	\$ 1,700
2. Educational	100
3. Labor Organizations	2,350
4.	
5. Total of lines 1 through 4	\$ 4,150

(Enter the total in Item on page 2 as shown)63

SCHEDULE 13—OTHER RECEIPTS (See Instructions, Item 50)

Other Sources (A)	Amount (B)
1.	\$
2. See Schedule	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$ 102,180

(Enter the total in Item on page 2 as shown)50

SCHEDULE 14—OTHER DISBURSEMENTS (See Instructions, Item 69)

Other Purposes (A)	Amount (B)
1.	\$
2. See Schedule	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$ 337,322

(Enter the total in Item on page 2 as shown)69

GENERAL MEETING

September 12, 1972

The meeting was called to order by Brother Lane at 8:00 P.M.

The minutes of the previous meeting were read and approved as read.

Brother Roegelin reported on the area meeting - 3 cases were withdrawn, 1 case lost for refusing to take a sobriety test, 14 cases won and 3 won by management.

NEW BUSINESS: Brother Jesinski made a motion to increase the initiation fee from \$100.00 to \$150.00 effective October 1, 1972. A motion was made and seconded to concur with the recommendation. Motion carried. By a secret ballot vote the motion carried. 217 ballots passed out
189 for
23 against
1 void
213 voted

GOOD AND WELFARE: Member asked if a member can change from a b to a plan. Brother Lane said not until end of this contract.

Receipts and expenditures were read and approved as read. There being no further business, the meeting adjourned at 8:40 P.M.

Respectfully submitted,

William Butler
William Butler, Recording Secretary

Schedules for LM-2

December 31, 1973

Schedule 8 - Disbursements to Officers

Name	Title	Status	Gross Salary	Allowance	Reimbursed Expense	Total
Roy Lane	President	C	\$ 28,319.96	\$ 2,600.00	\$ 452.62	\$ 31,372.58
James Jesinski	Sec'y. Treas.	C	28,319.96	2,600.00	-	30,919.96
Ervin Schultz	Vice-Pres.	C	2,555.00	-	-	2,555.00
William Butler	Rec. Sec'y.	C	2,845.00	-	-	2,845.00
Frank H. Ranney	Trustee	C	12,250.00	-	-	12,250.00
James Flanagan	"	C	3,020.00	-	127.50	3,147.50
Harvey Wallerman	"	C	2,495.00	-	-	2,495.00
			<u>\$ 79,804.92</u>	<u>\$ 5,200.00</u>	<u>\$ 580.12</u>	<u>\$ 85,585.04</u>

Schedule 9 - Disbursements to Employees

Name	Title	Status	Gross Salary	Allowance	Expense	Total
Henry Kucera	Bus. Rep.		\$ 21,453.31	\$ 1,200.00	\$ 73.11	\$ 22,726.42
Clarence Johannes	" "		21,453.31	1,200.00	-	22,653.31
Fred Hammer	" "		21,453.31	1,200.00	25.06	22,678.37
Charles Scott	Organizer		17,478.31	1,200.00	-	18,678.31
Raymond Fularczyk	Bus. Rep.		21,453.31	1,200.00	67.00	22,720.31
Duane Smith	Controller		11,554.26	-	-	11,554.26
Janice Fatura	Bookkeeper		11,617.86	-	-	11,617.86
Marion Brunner	Secretary		10,580.01	-	-	10,580.01
L. Christopher	"		10,580.01	-	-	10,580.01
Mary Ann Lensby	"		10,580.01	-	-	10,580.01
Kenneth Friesner	Organizer		17,416.65	1,200.00	33.23	18,649.88
James Bonnet	Bus. Rep.		18,790.01	1,100.00	143.26	20,033.27
Clifford Eils	" "		18,790.01	1,100.00	187.91	20,077.92
Michael Enea	Organizer		13,649.99	1,700.00	672.86	16,022.85
Employees who received less than \$10,000.00			<u>109,624.33</u>	<u>2,800.00</u>	<u>342.45</u>	<u>112,766.78</u>
			<u>\$336,474.69</u>	<u>\$13,900.00</u>	<u>\$1,544.88</u>	<u>\$351,919.57</u>

December 31, 1973

Schedule 13 - Other Receipts

Receipts from Affiliates	\$ 22,068.03
Collection of Returned Checks	828.50
Overpayment on Checkoffs	110.00
Refund - Expense	2,818.51
Services Reimbursed	60,000.00
Treasuries from Merger with Locals #225 and 257	11,861.83
Void Checks	1,682.90
Unused Attendance Money	2,700.00
Fair Share	110.00
	<u>\$102,179.77</u>

Schedule 14 - Other Disbursements

Payroll Deductions Paid	\$125,086.24
Refund of Dues and Initiation Fees	4,626.00
Organizing Expenses	235.49
Meeting and Committee Expense	14,592.55
Stewards' Expense	65,054.19
Automobile Expense	20,954.31
Checks Uncollected and Returned	828.50
Building Maintenance	40,140.63
Overpayment on Check-offs	110.00
Out-of-town Travel	6,663.97
Refunds	93.48
Interest	35,529.87
Recreational Expense	3,386.65
Meeting Attendance Bonus	20,020.00
	<u>\$337,321.88</u>

LABOR ORGANIZATION ANNUAL REPORT

FORM LM-2

Form approved by Bureau of the Budget
No. 44-R1132.1

1698

READ INSTRUCTIONS CAREFULLY BEFORE PREPARING REPORT

1. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)

Teamsters "General" Local #200

4.a. AFFILIATION

I.B. of T.C.W. and H. of A.

4.b. UNIT DESIGNATION (Local, Lodge, etc.)

Local

4.c. UNIT NUMBER

200

2. PERIOD
COVERED
BY THIS
REPORT

Month Day Year

From:

1 1 72

Thru:

12 31 72

3. LM FILE NO.

013815-60

5. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE.

Milwaukee

Milwaukee

WI

CITY

COUNTY

STATE

6. MAILING ADDRESS:

(for official mail to the Union)

(in care of) NAME OF PERSON

Mr. James Jesinski

CITY

Milwaukee

STATE

Wisconsin

NUMBER AND STREET

6200 West Bluemound Road

ZIP CODE

53213

7. Are records kept at address listed in Item 6? If "NO", give address in Item 18.

☒ YES ☐ NO

DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:

8. Have any accounts in banks or other financial institutions held in a name other than that of your organization? ☐ Yes ☒ No
9. Liquidate or reduce any liabilities without disbursement of cash? ☒ Yes ☐ No
10. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? ☐ Yes ☒ No
11. Acquire any goods or property in any manner other than by purchase or dispose of such property in any manner other than by sale? ☐ Yes ☒ No
12. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries as defined by Section 3(l) of the Act? ☒ Yes ☐ No

INDICATE BELOW ANY CHANGES IN THE LABOR ORGANIZATION INFORMATION REPORT (LM-1) WHICH HAVE NOT BEEN PREVIOUSLY REPORTED

13. Does the address in Item 6 represent a change? ☐ Yes ☒ No
14. Has there been a change in officers? ☐ Yes ☒ No
15. Have there been any other changes? ☐ Yes ☒ No

AS OF THE END OF THE REPORTING PERIOD:

16. Were any assets pledged as security or encumbered in any other way? ☐ Yes ☒ No
17. Did your organization have any contingent liabilities? ☐ Yes ☒ No

(If the answer to any of the above questions, other than 13 and 14, is "Yes," details must be provided in Item 18 below. See specific instructions for items which have been answered "Yes.")

Item No.	18. ADDITIONAL INFORMATION
9	Milwaukee Area Truck Drivers' Health and Welfare Fund pays rent to Local #200. But Local #200 has a liability to the Health and Welfare Fund. Instead of exchanging cash between them a book entry was made decreasing liability and increasing income in the amount of \$87,732.40.
12	Milwaukee Area Truck Drivers' Health and Welfare Fund.
12	General Local #200 Pension Fund.

RECEIVED
DEPT. OF LABOR
MANAGEMENT SERVICES
DIVISION

MAR 19 1973

AM
7,8,9,10,11,12,1

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned officers of the above labor organization declares that he is the officer required to sign this report and that the information contained in this report and any accompanying documents, is to the best of his knowledge and belief, true, correct, and complete.

71. SIGNED: Roy C Lane PRESIDENT
at: Milwaukee, WI on: 3/13/73
City State Date
(If other title, cross out and write in correct title above.)

72. SIGNED: Joe Jesinski TREASURER
at: Milwaukee, WI on: 3/13/73
City State Date
(If other title, cross out and write in correct title above.)

STATEMENT OF ASSETS AND LIABILITIES

STATEMENT OF RECEIPTS AND DISBURSEMENTS

SCHEDULE 1—LOANS RECEIVABLEForm LM-2 (Rev. 6/69) Page 2

SCHEDULE 2—OTHER INVESTMENTS (See Instructions, Item 25)

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding over \$1,000 where book value exceeds 20% of the total on line 2 above.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	16 950
5. Total Book Value	16 950
6. Itemize each Other Investment holding over \$1,000 where book value exceeds 20% of the total on line 5 above.	
(a) Milwaukee Publishers' Stock	16 950
(b)	
(c)	
(d)	
7. Total of lines 2 and 5	\$ 16 950
(Enter the total in Item on page 2 as shown)25	

SCHEDULE 3—OTHER ASSETS (See Instructions, Item 27)

Description (A)	Book Value (B)
1.	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$
(Enter the total in Item on page 2 as shown)27	
SCHEDULE 4—OTHER LIABILITIES (See Instructions, Item 32)	
Description (A)	Amount at End of Period (B)
1. Prepaid Rent - Health and	\$
2. Welfare Fund	779 771
3.	
4.	
5.	
6.	
7.	
8.	
9. Total of lines 1 through 8	\$ 779 771
(Enter the total in Item on page 2 as shown)32	

SCHEDULE 5—FIXED ASSETS (See Instructions, Item 26)

Description (A)	Cost or Other Basis (B)	Total Depreciation (if any) (C)	Book Value (D)
1. Land (Give Location): 6118-20 and 6132, 6200, 6310 West Bluemound Road Milwaukee, Wisconsin 53213	\$ 338 769		\$ 338 769
2. Buildings (Give Location): Same	1 424 658	207 938	1 216 720
3. Automotive Equipment	47 281	10 378	36 903
4. Office Furniture and Equipment	159 215	94 004	65 211
5. Other Fixed Assets			
6. Totals of lines 1 through 5	\$ 1 969 923	\$ 312 320	\$ 1 657 603
(Enter the total of column (D) in Item on page 2 as shown)26			

SCHEDULE 6—LOANS PAYABLE

Source (A)	Arrangements For Repayment (B)	Loans Obtained During Period (C)	Repayment of Loans During Period (D)	Balance at End of Period (E)
1.		\$	\$	\$
2.				
3.				
4.				
5. Total from Additional Listings, if any				
6. Totals of lines 1 through 5		\$	\$	\$
(Enter the totals of columns (C), (D), and (E) in Items on page 2 as shown)46.....68.....30				

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 47)

Description of Assets Sold (If Land or Building, Give Location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Automobiles	\$ 23 534	\$ 13 087	\$ 13 780	\$ 13 780
2.				
3.				
4.				
5. Totals of lines 1 through 4	\$ 23 534	\$ 13 087	\$ 13 780	\$ 13 780
(Enter the total of column (E) in Item on page 2 as shown)47				

SCHEDULE 8—DISBURSEMENTS TO OFFICERS (See Instructions, Item 56)

Name (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1. See Schedule			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6.							
7. Total from Additional Listings, if any							
8. Totals of lines 1 through 7			\$ 73,520	\$ 3,030	\$ 409	\$	\$ 76,959

(Enter the total of column (H) in Item on page 2 as shown) 56(a)

SCHEDULE 9—DISBURSEMENTS TO EMPLOYEES (See Instructions, Item 57)

Name (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1. See Schedule			\$	\$	\$	\$	\$
2.							
3.							
4.							
5. Total from Additional Listings, if any							
6. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements							
7. Totals of lines 1 through 6			\$ 240,417	\$ 7,150	\$ 445	\$	\$ 248,012

(Enter the total of column (H) in Item on page 2 as shown) 57(a)

SCHEDULE 10—PURCHASE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 65)

Description of Assets (if land or buildings, give location) (A)	Book Value (B)	Amount Paid (C)
1. Automobiles	\$ 18,074	\$ 18,074
2. Furniture and Office Equipment	816	816
3.		
4.		
5.		
6. Totals of lines 1 through 5	\$ 18,890	\$ 18,890

(Enter the total of column (C) in Item on page 2 as shown) 65

SCHEDULE 11—BENEFITS (See Instructions, Item 61)

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Pension		\$ 37,534
2. Group Life Insurance		77,157
3. Health and Welfare Insurance		19,372
4. Out-of-Work Benefits		10,353
5. Total of lines 1 through 4		\$ 144,416

(Enter the total in Item on page 2 as shown) 61

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS
(See Instructions, Item 63)

Type (A)	Amount (B)
1. Various	\$ 1,725
2.	
3.	
4.	
5. Total of lines 1 through 4	\$ 1,725

(Enter the total in item on page 2 as shown) 63

SCHEDULE 13—OTHER RECEIPTS (See Instructions, Item 50)

Other Sources (A)	Amount (B)
1. See Schedule	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$ 79,287

(Enter the total in Item on page 2 as shown) 50

SCHEDULE 14—OTHER DISBURSEMENTS (See Instructions, Item 69)

Other Purposes (A)	Amount (B)
1. See Schedule	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$ 284,848

(Enter the total in Item on page 2 as shown) 69

TEAMSTERS "GENERAL" LOCAL #200

Schedules for LM-2

December 31, 1972

Schedule 8 - Disbursements to Officers

<u>Name</u> (A)	<u>Title</u> (B)	<u>Sta-</u> <u>tus</u> (C)	<u>Gross</u> <u>Salary</u> (D)	<u>Allow-</u> <u>ances</u> (E)	<u>Reimbursed</u> <u>Expense</u> (F)	<u>Total</u> (H)
Roy Lane	President	C	\$ 25,969.96	\$1,530.00	\$ 307.45	\$ 27,807.41
Ervin Schultz	Vice-Pres.	C	2,320.00			2,320.00
James Jesinski	Sec'y.Treas.	C	25,969.96	1,500.00		27,469.96
William Butler	Rec. Sec'y.	N	2,620.00			2,620.00
Frank Ranney	Trustee	C	12,000.00			12,000.00
James Flanagan	Trustee	C	2,320.00		102.00	2,422.00
Harvey Wallerman	Trustee	C	2,320.00			2,320.00
			<u>\$ 73,519.92</u>	<u>\$3,030.00</u>	<u>\$ 409.45</u>	<u>\$ 76,959.37</u>

Schedule 9 - Disbursements to Employees

Henry Kucera	Business Rep.	\$ 20,670.00	\$1,030.00	\$	\$ 21,700.00
Clarence Johannes	Business Rep.	20,670.00	1,015.00		21,685.00
Frederick Hammer	Business Rep.	20,670.00	1,030.00	26.55	21,726.55
Charles Scott	Organizer	15,330.00	1,000.00		16,330.00
Raymond Fularczyk	Organizer	20,670.00	1,015.00	43.73	21,728.73
Henry Wambach	Organizer	12,249.96	1,030.00	10.12	13,290.08
Kenneth Friesner	Organizer	13,056.66	1,030.00	110.08	14,196.74
Duane Smith	Controller	10,738.76			10,738.76
Janice Fatura	Bookkeeper	10,804.24			10,804.24
Employees who received less than \$10,000.00		<u>95,557.14</u>		<u>255.00</u>	<u>95,812.14</u>
		<u>\$240,416.76</u>	<u>\$7,150.00</u>	<u>\$ 445.48</u>	<u>\$248,012.24</u>

TEAMSTERS "GENERAL" LOCAL #200

Schedules for LM-2

December 31, 1972

Schedule 13 - Other Receipts

From Joint Council #39	\$ 2,117.42
From Central Conference of Teamsters	12,252.00
Expense Reimbursement	1,940.57
Refund - Travel Expense	239.00
Reimbursed Services	60,000.00
Refunds	1,027.64
Unused Attendance Money	1,548.00
Uncollected Steward Money	82.50
Collection - Returned Checks	69.50
Overpayment on Check-offs	10.00
	<hr/>
	\$ 79,286.63

Schedule 14 - Other Disbursements

Payroll Deductions Paid	\$ 89,571.58
Meeting and Committee Expense	9,613.09
Refund - Dues and Initiation Fees	3,361.50
Strike Expense	5,360.90
Stewards' Expense	54,288.17
Auto Expense	16,974.43
Building Maintenance	36,444.12
Overpayment on Check-off	10.00
Out-of-Town Travel Expense	3,641.86
Interest	44,386.12
Equipment Maintenance	5,216.64
Recreation Expense	1,919.12
Checks - Uncollected	60.00
Meeting Attendance Bonus	14,000.00
	<hr/>
	\$284,847.53

Form LM-2 (Rev. 6/69) Page 1

STATEMENT OF ASSETS AND LIABILITIES

ASSETS				LIABILITIES			
Item	Sch.	(Start of Reporting Period) (A)	(End of Reporting Period) (B)	Item	Sch.	(Start of Reporting Period) (C)	(End of Reporting Period) (D)
19. Cash on Hand		\$	\$	29. Accounts Payable		\$	\$
20. Cash in Banks		161 439	205 225	30. Loans Payable	6		
21. Accounts Receivable				31. Mortgages Payable		56 007	
22. Loans Receivable	1			32. Other Liabilities	4	996 491	968 425
23. U.S. Treasury Securities				33. TOTAL LIABILITIES		\$ 1 052 498	\$ 968 425
24. Mortgage Investments							
25. Other Investments	2	16 950	16 950				
26. Fixed Assets	5	1 688 946	1 716 356	NET ASSETS			
27. Other Assets	3			34. Net Assets (Item 28 less			
28. TOTAL ASSETS		\$ 1 867 335	\$ 1 938 531	Item 33)		\$ 814 837	\$ 970 106

STATEMENT OF RECEIPTS AND DISBURSEMENTS

CASH RECEIPTS				CASH DISBURSEMENTS			
Item	Sch.	(A)	(B)	Item	Sch.	(A)	(B)
35. Dues		\$ 853 401		52. Per Capita Tax		\$ 224 689	
36. Per Capita Tax				53. Fees, Fines, Assessments, etc.			
37. Fees		56 561		54. To Affiliates of Funds Collected on Their Behalf			
38. Fines		3 580		55. For Account of Affiliates			2 330
39. Assessments				56. To Officers:	8		
40. Work Permits				(a) Gross		69 478	
41. On Behalf of Affiliates for Transmittal to Them				(b) Less Deductions		12 454	57 024
42. Sale of Supplies				57. To Employees:	9		
43. Interest				(a) Gross		235 369	
44. Dividends				(b) Less Deductions		43 183	192 186
45. Rents		125 332		58. Office and Administrative Expense			84 970
46. Loans Obtained	6			59. Educational and Publicity Expense			80
47. Sale of Investments and Fixed Assets	7	15 175		60. Professional Fees			7 316
48. Repayment of Loans Made	1			61. Benefits	11		146 888
49. From Members for Disbursement on Their Behalf		10 257		62. Loans Made	1		
50. From Other Sources	13	86 635		63. Contributions, Gifts and Grants	12		
51. TOTAL RECEIPTS				64. Supplies for Resale			
(Items 35 through 50)		\$ 1 150 941		65. Purchase of Investments and Fixed Assets	10		95 734
				66. Taxes			11 750
				67. On Behalf of Individual Members			13 104
				68. Repayment of Loans Obtained (Mortgage)	6		56 007
				69. For Other Purposes	14		215 076
				70. TOTAL DISBURSEMENTS			
				(Items 52 through 69)		\$ 1 107 154	

SCHEDULE 1—LOANS RECEIVABLE

Name of Officer, Employee, Member, or Business Enterprise (A)	Purpose of Loan, Security, if any, and Arrangement for Repayment (B)	Loans Made During Period (C)	Repayments Received During Period (D)	Balance at End of Period (E)
1.		\$	\$	\$
2.				
3.				
4.				
5.				
6. Total Additional Listings, if any				
7. Total Loans not Listed Above				
8. Totals of lines 1 through 7		\$	\$	\$ None
(Enter the totals of columns (C), (D), and (E) in Items on page 2 as shown) 62.....48.....22				

SCHEDULE 2—OTHER INVESTMENTS (See Instructions, Item 25)

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding over \$1,000 where book value exceeds 20% of the total on line 2 above.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	16 950
5. Total Book Value	16 950
6. Itemize each Other Investment holding over \$1,000 where book value exceeds 20% of the total on line 5 above.	
(a) Milwaukee Publishers, Inc.	
(b) Common Stock	16 950
(c)	
(d)	
7. Total of lines 2 and 5	\$ 16 950
(Enter the total in Item on page 2 as shown)25	

SCHEDULE 3—OTHER ASSETS (See Instructions, Item 27)

Description (A)	Book Value (B)
1.	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$ None
(Enter the total in Item on page 2 as shown)27	
SCHEDULE 4—OTHER LIABILITIES (See Instructions, Item 32)	
Description (A)	Amount at End of Period (B)
1. Prepaid Rent -	\$
2. Health and Welfare Fund	968 425
3.	
4.	
5.	
6.	
7.	
8.	
9. Total of lines 1 through 8	\$ 968 425
(Enter the total in Item on page 2 as shown)32	

SCHEDULE 5—FIXED ASSETS (See Instructions, Item 26)

Description (A)	Cost or Other Basis (B)	Total Depreciation (if any) (C)	Book Value (D)
1. Land (Give Location): 6118-20 and 6132, 6200, 6310 West Bluemound Road Milwaukee, Wisconsin 53213	\$ 338 769		\$ 338 769
2. Buildings (Give Location): Same	1 424 658	172 322	1 252 336
3. Automotive Equipment	52 741	7 764	44 977
4. Office Furniture and Equipment	158 400	78 124	80 276
5. Other Fixed Assets			
6. Totals of lines 1 through 5	\$ 1 974 568	258 210	\$ 1 716 358
(Enter the total of column (D) in Item on page 2 as shown)26			

SCHEDULE 6—LOANS PAYABLE

Source (A)	Arrangements For Repayment (B)	Loans Obtained During Period (C)	Repayment of Loans During Period (D)	Balance at End of Period (E)
1.		\$	\$	\$
2.				
3.				
4.				
5. Total from Additional Listings, if any				
6. Totals of lines 1 through 5		\$	\$	\$ None
(Enter the totals of columns (C), (D), and (E) in Items on page 2 as shown)466830				

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 47)

Description of Assets Sold (If Land or Building, Give Location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. 6 Automobiles	\$ 22 272	17 301	15 175	15 175
2.				
3.				
4.				
5. Totals of lines 1 through 4	\$ 22 272	17 301	15 175	15 175
(Enter the total of column (E) in Item on page 2 as shown)47				

SCHEDULE 8—DISBURSEMENTS TO OFFICERS (See Instructions, Item 56)

Name (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$	\$	\$	\$	\$
2.							
3.	Separate Schedule						
4.							
5.							
6.							
7.	Total from Additional Listings, if any						
8.	Totals of lines 1 through 7						
			\$ 48 988	\$ 17 150	\$ 3 340		\$ 69 478

(Enter the total of column (H) in Item on page 2 as shown)56(a)

SCHEDULE 9—DISBURSEMENTS TO EMPLOYEES (See Instructions, Item 57)

Name (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$	\$	\$	\$	\$
2.	Separate Schedule						
3.							
4.							
5.	Total from Additional Listings, if any						
6.	Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements						
7.	Totals of lines 1 through 6						
			\$ 222 050	\$ 11 380	\$ 1 939		\$ 235 369

(Enter the total of column (H) in Item on page 2 as shown)57(a)

SCHEDULE 10—PURCHASE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 65)

Description of Assets (if land or buildings, give location) (A)	Book Value (B)	Amount Paid (C)
1.		
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TEAMSTERS "GENERAL" LOCAL 200

LM-2 - 1971

SCHEDULE 8 - DISBURSEMENTS TO OFFICERS

Name (A)	Title (B)	Sta- tus (C)	Gross Salary (D)	Allow- ances (E)	Expenses incl. Reimb'd. Expenses (F)	Total (H)
Roy Lane	President	C	\$21,403.33	\$ 1,200.00	\$1,787.00	\$ 24,390.33
Frank H. Ranney	Trustee	C	-	7,950.00	904.00	8,854.00
James Jesinski	Sec'y.-Treas.	N	18,669.95	1,200.00	187.00	20,056.95
Ervin Schultz	Vice-Pres.	C	1,937.50	1,400.00	95.00	3,432.50
James Flanagan	Trustee	C	1,937.50	1,400.00	92.00	33,429.50
Harvey Wallerman	Trustee	C	1,937.50	1,400.00	83.00	3,420.50
Charles Davis	Trustee	C	2,237.50	1,400.00	130.00	3,767.50
Raymond Fularczyk	Trustee	C	875.00	1,200.00	52.00	2,127.00
Total to Page 4, Line 8			<u>\$48,998.28</u>	<u>\$17,150.00</u>	<u>\$3,330.00</u>	<u>\$ 69,478.28</u>

SCHEDULE 9 - DISBURSEMENTS TO EMPLOYEES

Raymond Fularczyk	Organizer	\$ 14,651.63	\$ -	\$ 49.00	\$ 14,700.63
Frederick Hammer	Bus. Rep.	16,103.26	-	1,072.00	17,175.26
Clarence Johannes	Bus. Rep.	16,103.26	1,200.00	140.00	17,443.26
Henry J. Kucera	Bus. Rep.	16,103.26	1,200.00	591.00	17,894.26
Thomas E. Melms	Organizer	10,334.97	-	-	10,334.97
Charles Scott	Organizer	14,411.63	-	54.00	14,465.63
Katharine Vedder	Bookkeeper	11,782.10	-	-	11,782.10
Henry Wambach	Organizer	10,966.59	-	33.00	10,999.59
Duane Smith	Controller	10,493.72	-	-	10,493.72
Employees who received less than \$10,000		<u>101,099.42</u>	<u>8,980.00</u>	<u>-</u>	<u>110,079.42</u>
Total to Page 4, Line 7		<u>\$222,049.84</u>	<u>\$11,380.00</u>	<u>\$1,939.00</u>	<u>\$235,368.84</u>

TEAMSTERS "GENERAL" LOCAL 200

LM-2 - 1971

SCHEDULE 13 - OTHER RECEIPTS

Health & Welfare Salary Reimbursement	\$ 60,000.00
Refunds	235.00
Withdrawal and Transfer Cards	533.00
Receipts from International	5,260.00
From Central Conference of Teamsters	11,000.00
From Wisconsin Teamsters Joint Council #39	2,038.00
Expenses Reimbursed	707.00
Sale of Supplies	738.00
Miscellaneous Receipts	2,640.00
Insurance Refund	667.00
Return of Unused Steward Money	900.00
Reimbursed Refunds from Various Locals - Riders	133.00
Checks Voided	901.00
Return of Attendance Bonus Money	342.00
Settlement of Car Accident	306.00
Pension Exchange	180.00
Collection - on Returned Checks	<u>55.00</u>

Total to Page 4, Schedule 13 \$ 86,635.00

SCHEDULE 14 - OTHER DISBURSEMENTS

Payroll Taxes	\$ 58,211.00
Refunds	2,348.00
Meeting and Committee Expenses	13,867.00
Strike Expenses	241.00
Stewards Expenses	34,618.00
Automobile Expenses	13,477.00
Checks Uncollected and Returned	273.00
Building Maintenance	37,822.00
Interest	50,154.00
Recreational Expense	<u>4,065.00</u>

Total to Page 4, Schedule 14 \$215,076.00

LABOR ORGANIZATION ANNUAL REPORT
FORM LM-2

Form approved by Bureau of the Budget
No. 44-R1132.1

3114

READ INSTRUCTIONS CAREFULLY BEFORE PREPARING REPORT

1. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)

TEAMSTERS "GENERAL" LOCAL #200

4.a. AFFILIATION

I.B.T.C.W. & H. of A.

4.b. UNIT DESIGNATION (Local, Lodge, etc.)

Local

4.c. UNIT NUMBER

200

2. PERIOD
COVERED
BY THIS
REPORT

From:

Month

Day

Year

Thru:

Month

Day

Year

3. LM FILE NO.

HOME

013815-66

5. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE.

Milwaukee
CITY

Milwaukee
COUNTY

Wis.
STATE

6. MAILING ADDRESS:

(for official mail to the Union)

(in care of) NAME OF PERSON

Mr. Frank Ranney

CITY

Milwaukee

6200 West Bluemound Road

STATE

Wisconsin

NUMBER AND STREET

ZIP CODE

53213

7. Are records kept at address listed in Item 6? If "NO", give address in Item 18.

☐ YES ☐ NO

DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:

8. Have any accounts in banks or other financial institutions held in a name other than that of your organization? ☐ Yes ☒ No

9. Liquidate or reduce any liabilities without disbursement of cash? ☒ Yes ☐ No

10. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? ☐ Yes ☒ No

11. Acquire any goods or property in any manner other than by purchase or dispose of such property in any manner other than by sale? ☐ Yes ☒ No

12. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries as defined by Section 3(l) of the Act? ☒ Yes ☐ No

INDICATE BELOW ANY CHANGES IN THE LABOR ORGANIZATION INFORMATION REPORT (LM-1) WHICH HAVE NOT BEEN PREVIOUSLY REPORTED

13. Does the address in Item 6 represent a change? ☐ Yes ☒ No

14. Has there been a change in officers? ☐ Yes ☒ No

15. Have there been any other changes? ☐ Yes ☒ No

AS OF THE END OF THE REPORTING PERIOD:

16. Were any assets pledged as security or encumbered in any other way? ☒ Yes ☐ No

17. Did your organization have any contingent liabilities? ☐ Yes ☒ No

(If the answer to any of the above questions, other than 13 and 14, is "Yes," details must be provided in Item 18 below. See specific instructions for items which have been answered "Yes.")

Item No.	18. ADDITIONAL INFORMATION
9	Rent - January, 1970 to December, 1970 \$150,398.40 due by Milwaukee Area Truck Drivers Health & Welfare Fund against Prepaid Rent. (See Page 2, Item 32)
12	Milwaukee Area Truck Drivers Health & Welfare Fund
12	General Local #200 Pension Fund
16	Land and Building Mortgaged Marshall & Isley Bank

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned officers of the above labor organization declares that he is the officer required to sign this report and that the information contained in this report and any accompanying documents, is to the best of his knowledge and belief, true, correct, and complete.

71. SIGNED: Roy C. Lant

at: Milwaukee, Wis. on: 3/29/1971
City State Date

PRESIDENT
(If other title, cross out and write in correct title above.)

72. SIGNED: J. F. Ranney

at: Milwaukee, Wis. on: 3/29/1971
City State Date

Secy-

TREASURER

(If other title, cross out and write in correct title above.)

STATEMENT OF ASSETS AND LIABILITIES

STATEMENT OF ASSETS AND LIABILITIES

STATEMENT OF RECEIPTS AND DISBURSEMENTS

SCHEDULE 1—LOANS RECEIVABLEForm LM-2 (Rev. 6/69) Page 2

SCHEDULE 2—OTHER INVESTMENTS (See Instructions, Item 25)

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding over \$1,000 where book value exceeds 20% of the total on line 2 above.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	16,950
5. Total Book Value	16,950
6. Itemize each Other Investment holding over \$1,000 where book value exceeds 20% of the total on line 5 above.	
(a) Milwaukee Publishers, Inc.	
(b) (Common Stock)	16,950
(c)	
(d)	
7. Total of lines 2 and 5	\$ 16,950
(Enter the total in Item on page 2 as shown)25	

SCHEDULE 3—OTHER ASSETS (See Instructions, Item 27)

Description (A)	Book Value (B)
1.	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$ NONE
(Enter the total in Item on page 2 as shown)27	
SCHEDULE 4—OTHER LIABILITIES (See Instructions, Item 32)	
Description (A)	Amount at End of Period (B)
1. Prepaid Rent -	\$
2. Health & Welfare Fund	993,491
3. H & W Ins. Contributions	
4. Collected & not transmitted	3,000
5.	
6.	
7.	
8.	
9. Total of lines 1 through 8	\$ 996,491
(Enter the total in Item on page 2 as shown)32	

SCHEDULE 5—FIXED ASSETS (See Instructions, Item 26)

Description (A)	Cost or Other Basis (B)	Total Depreciation (if any) (C)	Book Value (D)
1. Land (Give Location): 6118/18/20 & 32 6200-6310 West Bluemound Road	\$ 338,769		\$ 338,769
2. Buildings (Give Location): Same	1,381,876	\$ 140,211	1,241,665
3. Automotive Equipment	39,737	9,950	29,787
4. Office Furniture and Equipment	147,931	69,205	78,726
5. Other Fixed Assets			
6. Totals of lines 1 through 5	\$ 1,908,313	\$ 219,366	\$ 1,688,947
(Enter the total of column (D) in Item on page 2 as shown)26			

SCHEDULE 6—LOANS PAYABLE

Source (A)	Arrangements For Repayment (B)	Loans Obtained During Period (C)	Repayment of Loans During Period (D)	Balance at End of Period (E)
1.		\$	\$	\$
2.				
3.				
4.				
5. Total from Additional Listings, if any				
6. Totals of lines 1 through 5		\$	\$	\$
(Enter the totals of columns (C), (D), and (E) in Items on page 2 as shown)466830				

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 47)

Description of Assets Sold (If Land or Building, Give Location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. 7 Automobiles	\$ 26,218	\$ 10,573	\$ 13,400	\$ 13,400
2.				
3.				
4.				
5. Totals of lines 1 through 4	\$ 26,218	\$ 10,573	\$ 13,400	\$ 13,400
(Enter the total of column (E) in Item on page 2 as shown)47				

SCHEDULE 8—DISBURSEMENTS TO OFFICERS (See Instructions, Item 56)

Name (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$	\$	\$	\$	\$
2.							
3.	Separate Schedule						
4.							
5.							
6.							
7.	Total from Additional Listings, if any						
8.	Totals of lines 1 through 7		\$ 22,645	\$ 12,950	\$ 5,802	\$ -	\$ 41,397

(Enter the total of column (H) in Item on page 2 as shown)56(a)

SCHEDULE 9—DISBURSEMENTS TO EMPLOYEES (See Instructions, Item 57)

Name (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$	\$	\$	\$	\$
2.							
3.	Separate Schedule						
4.							
5.	Total from Additional Listings, if any						
6.	Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements						
7.	Totals of lines 1 through 6		\$ 218,829	\$ 360	\$ 2,729	\$ -	\$ 221,918

(Enter the total of column (H) in Item on page 2 as shown)57(a)

SCHEDULE 10—PURCHASE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 65)

Description of Assets (if land or buildings, give location) (A)	Book Value (B)	Amount Paid (C)
1. 7 Automobiles	\$ 28,582	\$ 28,582
2. Office Equipment	837	837
3.		
4.		
5.		
6.	Totals of lines 1 through 5	\$ 29,419 \$ 29,419

(Enter the total of column (C) in Item on page 2 as shown)65

SCHEDULE 11—BENEFITS (See Instructions, Item 61)

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Pension		\$ 32,913
2. Group Life Insurance		76,166
3. Health & Welfare Insurance		15,085
4. Sick Dues \$9,033 Accident & Sick. \$1,450		10,483
5.	Total of lines 1 through 4	\$ 134,647

(Enter the total in Item on page 2 as shown)Total 1

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS
(See Instructions, Item 63)

Type (A)	Amount (B)
1. Various	\$ 600
2.	
3.	
4.	
5.	Total of lines 1 through 4

(Enter the total in Item on page 2 as shown)63

SCHEDULE 13—OTHER RECEIPTS (See Instructions, Item 50)

Other Sources (A)	Amount (B)
1.	\$
2. Separate Schedule	
3.	
4.	
5.	
6.	Total of lines 1 through 5

(Enter the total in Item on page 2 as shown)50

SCHEDULE 14—OTHER DISBURSEMENTS (See Instructions, Item 69)

Other Purposes (A)	Amount (B)
1.	\$
2. Separate Schedule	
3.	
4.	
5.	
6.	Total of lines 1 through 5

(Enter the total in Item on page 2 as shown)69

TEAMSTERS "GENERAL" LOCAL #200

LM-2 - 1970

Schedule 8 - Disbursements to Officers:

Name (A)	Title (B)	Sta- tus (C)	Gross Salary (D)	Allowances (E)	Expenses inclu- ding Reimbursed Expenses (F)	Total (H)
Roy Lane	Pres.	(C)	\$20,670.00	-	\$2,356.54	\$23,026.54
Frank H. Ranney	Sec.-Treas.	(C)	-	\$6,000.00	2,938.02	8,938.02
Ervin Schultz	Vice Pres.	(C)	475.00	1,325.00	99.62	1,899.62
James Flanagan	Trustee	(C)	475.00	1,425.00	92.04	1,992.04
Harvey Wallermann	Trustee	(C)	475.00	1,425.00	109.24	2,009.24
Charles Davis	Trustee	(C)	550.00	1,650.00	50.99	2,250.99
Raymond Fularczyk	Trustee	(C)	-	1,125.00	155.10	1,280.10
Total to Page 4, Line 8			\$22,645.00	\$12,950.00	\$5,801.55	\$41,396.55

Schedule 9 - Disbursements to Employees:

Name (A)	Position (B)	Gross Salary (D)	Allowances (E)	Expenses inclu- ding Reimbursed Expenses (F)	Total (H)
Raymond Fularczyk	Organizer	\$12,300.00	-		\$ 12,300.00
Frederick Hammer	Business Rep.	15,370.00	100.00	537.26	16,007.26
James Jesinski	Office Manager	15,370.00	100.00	573.11	16,043.11
Clarence Johannes	Business Rep.	15,370.00	100.00	343.56	15,813.56
Henry J. Kucera	Business Rep.	15,370.00	60.00	1,274.86	16,704.86
Thomas E. Melms	Organizer	14,045.00	-	-	14,045.00
Charles Scott	"	14,045.00	-	-	14,045.00
Katharine Vedder	Bookkeeper	10,770.21	-	-	10,770.21
Henry Wambach	Organizer	10,600.00	-	-	10,600.00
Employees who received less than \$10,000.00		95,588.89			95,588.89
Total to Page 4, Line 7		\$218,829.10	\$360.00	\$2,728.79	\$221,917.89

TEAMSTERS "GENERAL" LOCAL #200

LM-2 - 1970

Other Receipts

From Central Conference of Teamsters	\$ 11,000.00
Withdrawal of Transfer Cards	518.00
Service & Salary Reimbursement (from Milwaukee Area Truck Drivers) (Health & Welfare Fund)	60,000.00
Refunds	371.15
Expense Reimbursement	4,433.29
Settlement of Accident, damage, etc.	287.56
Collection - Returned Checks	911.00
Miscellaneous	<u>117.78</u>

Total (To Page 4, Schedule 13, Line 6). \$ 77,638.78

Other Disbursements

Payroll Taxes	\$ 50,217.54
Refunds	1,854.50
Organizing Expenses	79.56
Meeting & Committee Expenses	12,364.67
Strike Expenses	304.82
Stewards Expenses	38,404.88
Automobile Expenses	14,721.63
Checks Uncollected & Returned	1,011.00
Building Maintenance	37,669.19
Interest	57,512.25
Recreational Expense	2,656.23
Meeting Attendance Bonus	<u>9,000.00</u>

Total (To Page 4, Schedule 14, Line 6). \$225,796.27

LABOR ORGANIZATION ANNUAL REPORT

FORM LM-2

Form approved by Bureau of the Budget
No. 44-R1132.1

READ INSTRUCTIONS CAREFULLY BEFORE PREPARING REPORT

1. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)

Teamsters "General" Local #200

2. PERIOD
COVERED
BY THIS
REPORT

Month	Day	Year
1	1	69
12	31	69

3. LM FILE NO.

013815-64

4.a. AFFILIATION

I.B.T.C.W. & H. of A.

4.b. UNIT DESIGNATION (Local, Lodge, etc.)

Local

4.c. UNIT NUMBER

200

5. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE.

Milwaukee

Milwaukee

Wisconsin

CITY

COUNTY

STATE

6. MAILING ADDRESS:

(for official mail to the Union)

(in care of) NAME OF PERSON

Mr. Frank Ranney

6200 West Bluemound Road

CITY

STATE

ZIP CODE

Milwaukee

Wisconsin

53213

7. Are records kept at address listed in Item 6? If "NO", give address in Item 18.

☒ YES ☐ NO

DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:

8. Have any accounts in banks or other financial institutions held in a name other than that of your organization? ☐ Yes ☒ No
9. Liquidate or reduce any liabilities without disbursement of cash? ☒ Yes ☐ No
10. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? ☐ Yes ☒ No
11. Acquire any goods or property in any manner other than by purchase or dispose of such property in any manner other than by sale? ☐ Yes ☒ No
12. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries as defined by Section 3(l) of the Act? ☒ Yes ☐ No

INDICATE BELOW ANY CHANGES IN THE LABOR ORGANIZATION INFORMATION REPORT (LM-1) WHICH HAVE NOT BEEN PREVIOUSLY REPORTED

13. Does the address in Item 6 represent a change? ☐ Yes ☒ No
14. Has there been a change in officers? ☐ Yes ☒ No
15. Have there been any other changes? ☐ Yes ☒ No

AS OF THE END OF THE REPORTING PERIOD:

16. Were any assets pledged as security or encumbered in any other way? ☒ Yes ☐ No
17. Did your organization have any contingent liabilities? ☐ Yes ☒ No

(If the answer to any of the above questions, other than 13 and 14, is "Yes," details must be provided in Item 18 below. See specific instructions for items which have been answered "Yes.")

Item No.	18. ADDITIONAL INFORMATION
9	Rent for Months of May to December, 1969, \$100,265.60
32	due by Local #200 Health and Welfare Fund
	against Prepaid Rent
12	Milwaukee Area Truck Drivers Health and Welfare Fund - WP 90804
12	General Local #200 Pension Fund
16	Land and Building: Mortgage - Marshall & Ilsley Bank

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned officers of the above labor organization declares that he is the officer required to sign this report and that the information contained in this report and any accompanying documents, is to the best of his knowledge and belief, true, correct, and complete.

71. SIGNED:

Roy Lane

PRESIDENT

at Milwaukee, Wis.

on: 3/23/70

City

State

Date

(If other title, cross out and write in correct title above.)

72. SIGNED:

Frank Ranney

SECRETARY

at Milwaukee, Wis.

on: 3/23/70

City

State

Date

(If other title, cross out and write in correct title above.)

STATEMENT OF RECEIPTS AND DISBURSEMENTS

SCHEDULE 1—LOANS RECEIVABLEForm LM-2 (Rev. 2/68) Page 2

ENTER AMOUNTS IN DOLLARS ONLY

SCHEDULE 2—OTHER INVESTMENTS (See Instructions, Item 25)

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding over \$1,000 where book value exceeds 20% of the total on line 2 above.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	16 950
5. Total Book Value	16 950
6. Itemize each Other Investment holding over \$1,000 where book value exceeds 20% of the total on line 5 above.	
(a) Milwaukee Publishers Inc.	
(b) (Common Stock)	16 950
(c)	
(d)	
7. Total of lines 2 and 5	\$ 16 950
(Enter the total in Item on page 2 as shown) 25	

SCHEDULE 3—OTHER ASSETS (See Instructions, Item 27)

Description (A)	Book Value (B)
1.	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$ NONE
(Enter the total in Item on page 2 as shown) 27	

SCHEDULE 4—OTHER LIABILITIES (See Instructions, Item 32)

Description (A)	Amount at End of Period (B)
1. Prepaid Rent	\$
2. Health & Welfare Fund	1 143 890
3.	
4.	
5.	
6.	
7.	
8.	
9. Total of lines 1 through 8	\$ 1 143 890
(Enter the total in Item on page 2 as shown) 32	

SCHEDULE 5—FIXED ASSETS (See Instructions, Item 26)

Description (A)	Cost or Other Basis (B)	Total Depreciation (if any) (C)	Book Value (D)
1. Land (Give Location): 6116/18/20 & 32 6200 6310 West Bluemound Road	\$ 338 769		\$ 338 769
2. Buildings (Give Location): Same	1 381 875	\$ 105 664	1 276 211
3. Automotive Equipment	40 562	19 290	21 272
4. Office Furniture and Equipment	147 094	54 412	92 682
5. Other Fixed Assets			
6. Totals of lines 1 through 5	\$ 1 908 300	\$ 179 366	\$ 1 728 934
(Enter the total of column (D) in Item on page 2 as shown) 26			

SCHEDULE 6—LOANS PAYABLE

Source (A)	Arrangements For Repayment (B)	Loans Obtained During Period (C)	Repayment of Loans During Period (D)	Balance at End of Period (E)
1.		\$	\$	\$
2.				
3.				
4.				
5. Total from Additional Listings, if any				
6. Totals of lines 1 through 5		\$	\$	\$
(Enter the totals of columns (C), (D), and (E) in Items on page 2 as shown) 46 68 30				

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 47)

Description of Assets Sold (If Land or Building, Give Location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1.	\$	\$	\$	\$
2.				
3.				
4.				
5. Totals of lines 1 through 4	\$	\$	\$	\$ NONE
(Enter the total of column (E) in Item on page 2 as shown)				

SCHEDULE 8—DISBURSEMENTS TO OFFICERS (See Instructions, Item 56)

Name (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$		\$		\$
2.							
3.							
4.	SEPARATE SCHEDULE						
5.							
6.							
7. Total from Additional Listings, if any							
8. Totals of lines 1 through 7			\$	20,670	\$	15,500	\$ 36,170

(Enter the total of column (H) in Item on page 2 as shown) 56(a)

SCHEDULE 9—DISBURSEMENTS TO EMPLOYEES (See Instructions, Item 57)

Name (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$		\$		\$
2.							
3.	SEPARATE SCHEDULE						
4.							
5. Total from Additional Listings, if any							
6. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements							
7. Totals of lines 1 through 6			\$	207,241	\$	527	\$ 207,768

(Enter the total of column (H) in Item on page 2 as shown) 57(a)

SCHEDULE 10—PURCHASE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 65)

Description of Assets (if land or buildings, give location) (A)	Book Value (B)	Amount Paid (C)
1. New Building	\$ 13,397	\$ 13,397
2. Automobile	7,933	7,933
3.		
4.		
5.		
6. Totals of lines 1 through 5		\$ 21,330

(Enter the total of column (C) in Item on page 2 as shown) 65

SCHEDULE 11—BENEFITS (See Instructions, Item 61)

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Out of Work		\$ 3,780
2. Insurance—Members & Employees		79,117
3. Pension—Health & Welfare		38,079
4. Sick Benefits		8,267
5. Total of lines 1 through 4		\$ 129,243

(Enter the total in Item on page 2 as shown) 61

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS
(See Instructions, Item 63)

Type (A)	Amount (B)	
1. Educational	\$ 100	
2. V.F.W.	100	
3.		
4.		
5. Total of lines 1 through 4		\$ 200

(Enter the total in Item on page 2 as shown) 63

SCHEDULE 13—OTHER RECEIPTS (See Instructions, Item 50)

Other Services (A)	Amount (B)	
1.	\$	
2. SEPARATE SCHEDULE		
3.		
4.		
5.		
6. Total of lines 1 through 5		\$ 234,307

(Enter the total in Item on page 2 as shown) 50

SCHEDULE 14—OTHER DISBURSEMENTS (See Instructions, Item 69)

Other Purposes (A)	Amount (B)	
1.	\$	
2. SEPARATE SCHEDULE		
3.		
4.		
5.		
6. Total of lines 1 through 5		\$

(Enter the total in Item on page 2 as shown) 69

TEAMSTERS "GENERAL" LOCAL UNION #200

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Schedule 8 - Disbursements to Officers:

Name (A)	Title (B)	Status (C)	Gross Salary (D)	Allowances (E)	Total (H)
Roy Lane	Pres.	C	20,670.00		20,670.00
Frank H. Ranney	Sec-Treas.	C		6,000.00	6,000.00
Ervin Schultz	V.Pres.	C		1,900.00	1,900.00
James Flanagan	Trustee	C		1,900.00	1,900.00
Harvey Wallermann	Trustee	C		1,900.00	1,900.00
Charles Davis	Trustee	C		2,200.00	2,200.00
Raymond Fularczyk	Trustee	C		1,600.00	1,600.00
Total to Page 4, Line 8.			20,670.00	15,500.00	36,170.00

Schedule 9 - Disbursements to Employees:

Name (A)	Position (B)	Gross Salary (D)	Allowances (E)	Total (H)
Raymond Fularczyk	Organizer	11,166.66		11,166.66
Frederick Hammer	Business Rep.	15,261.61	21.00	15,282.61
James Jesinski	Office Manager	15,261.63	87.00	15,348.63
Clarence Johannes	Business Rep.	15,370.00		15,370.00
Henry J. Kucera	Business Rep.	15,370.00	119.00	15,489.00
Thomas E. Melms	Organizer	14,045.00	100.00	14,145.00
Charles Scott	Organizer	14,045.00	100.00	14,145.00
Katharine Vedder	Bookkeeper	10,346.33		10,346.33
Henry Wambach	Organizer	10,600.00	100.00	10,700.00
Employees who received less than \$10,000.00		85,774.34		85,774.34
		207,240.57	527.00	207,767.57

TEAMSTERS "GENERAL" LOCAL UNION #200

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1969

Other Receipts

Withdrawal & Transfer Cards	\$ 495.00
Rent & Service - Health & Welfare Fund	210,398.00*
Refunds	633.00
Expense Reimbursement	6,115.00
From International	2,310.00
From Central Conference of Teamsters	10,000.00
From Central States	2,000.00
From Insurance Company	1,595.00
Sale of Supplies	448.00
Miscellaneous	280.00
Collection - Returned Checks	<u>34.00</u>

Total (To Page 4, Schedule 13, Line 6) \$234,308.00

Disbursements:

For Other Purposes:

Payroll Taxes	51,006.00
Meeting Attendance Bonus	10,800.00
Refunds	1,609.00
Liabilities:	
Prepaid Rent Health & Welfare Fund	100,266.00*
Meeting, Committee & Steward Expenses	50,179.00 — X
Strike Expenses	11,116.00
Building Maintenance	30,113.00 —
Out of Town Travel Expense	2,949.00 — X
Interest Paid	67,302.00
Recreational Expense	2,741.00
To Health & Welfare Fund:	
Premiums Employees Strike	26,545.00
Automobile Expenses	15,697.00 — X
Checks - Uncollected & Returned	<u>34.00</u>

Total (To Page 4, Schedule 14, Line 6) \$370,357.00

* See Page 1, Item 9

LABOR ORGANIZATION ANNUAL REPORT

FORM LM-2

Form approved by Bureau of the Budget
No. 44-R1132.1

0827

READ INSTRUCTIONS CAREFULLY BEFORE PREPARING REPORT

1. NAME OF LABOR ORGANIZATION (as shown on charter, constitution, etc.)

Teamsters "General" Local #200

4.a. AFFILIATION

I.B.T.C.W. & H. of A.

4.b. UNIT DESIGNATION (Local, Lodge, etc.)

Local

4.c. UNIT NUMBER

200

6. MAILING ADDRESS:

(for official mail to the Union)

(in care of) NAME OF PERSON

Mr. Frank Ranney 6200 West Bluemound Road

CITY

Milwaukee

STATE

Wisconsin

ZIP CODE

53213

5. CITY, COUNTY AND STATE WHERE CHARTERED TO OPERATE.

Milwaukee

Milwaukee

Wisconsin

CITY

COUNTY

STATE

NUMBER AND STREET

7. Are records kept at address listed in Item 6? If "NO", give address in Item 18.

☒ YES ☐ NO

DURING THE REPORTING PERIOD DID YOUR ORGANIZATION DIRECTLY OR INDIRECTLY:

- 2 8. Have any accounts in banks or other financial institutions held in a name other than that of your organization? Yes No ☐ ☒
- 2 9. Liquidate or reduce any liabilities without disbursement of cash? ☐ ☒
- 2 10. Create or participate in the administration of any business enterprises or other organizations which met the definition of a "subsidiary organization" as that term is defined in the instructions on page 2? ☐ ☒
- 2 11. Acquire any goods or property in any manner other than by purchase or dispose of such property in any manner other than by sale? ☐ ☒
- 1 12. Create or participate in the administration of a trust or other fund or organization, a primary purpose of which is to provide benefits for members or their beneficiaries as defined by Section 3(l) of the Act? ☒ ☐

INDICATE BELOW ANY CHANGES IN THE LABOR ORGANIZATION INFORMATION REPORT (LM-1) WHICH HAVE NOT BEEN PREVIOUSLY REPORTED

13. Does the address in Item 6 represent a change? ☐ ☒
14. Has there been a change in officers? ☐ ☒
15. Have there been any other changes? ☐ ☒

AS OF THE END OF THE REPORTING PERIOD:

16. Were any assets pledged as security or encumbered in any other way? ☒ ☐
17. Did your organization have any contingent liabilities? ☐ ☒

(If the answer to any of the above questions, other than 13 and 14, is "Yes," details must be provided in Item 18 below. See specific instructions for items which have been answered "Yes.")

Item No.

18. ADDITIONAL INFORMATION

12 Milwaukee Area Truck Drivers Health and Welfare Fund

12 General Local #200 Pension Fund

16 Land and Building: Mortgage - Marshall & Ilsley Bank

(If more space is needed, attach additional sheets with further statement, properly identified.)

Each of the undersigned officers of the above labor organization declares that he is the officer required to sign this report and that the information contained in this report and any accompanying documents, is to the best of his knowledge and belief, true, correct, and complete.

71. SIGNED: Roy C Lane

at: Milwaukee, Wis. on: 3/26/69
City State Date

PRESIDENT
(If other title, cross out and write in correct title above.)

72. SIGNED: J. H. Ranney Secretary -

at: Milwaukee, Wis. on: 3/26/69
City State Date

TREASURER
(If other title, cross out and write in correct title above.)

STATEMENT OF ASSETS AND LIABILITIES

ASSETS		(Start of Reporting Period)	(End of Reporting Period)	LIABILITIES		(Start of Reporting Period)	(End of Reporting Period)
Item	Sch.	(A)	(B)	Item	Sch.	(C)	(D)
19. Cash on Hand		\$ 166,619	\$ 107,342	29. Accounts Payable		\$ -	\$ -
20. Cash in Banks		-	-	30. Loans Payable	6	-	-
21. Accounts Receivable		-	-	31. Mortgages Payable		221,648	154,642
22. Loans Receivable	1	-	-	32. Other Liabilities	4	938,657	1,244,155
23. U.S. Treasury Securities		-	-	33. TOTAL LIABILITIES		<u>\$ 1,160,305</u>	<u>\$ 1,398,797</u>
24. Mortgage Investments		-	-				
25. Other Investments	2	16,450	16,950				
26. Fixed Assets	5	1,489,356	1,765,311				
27. Other Assets	3	-	-	NET ASSETS			
28. TOTAL ASSETS		<u>\$ 1,672,425</u>	<u>\$ 1,889,603</u>	34. Net Assets (Item 28 less Item 33)		<u>\$ -</u>	<u>\$ -</u>

STATEMENT OF RECEIPTS AND DISBURSEMENTS

Item	RECEIPTS	Sch.	(A)	Item	DISBURSEMENTS	Sch.	(B)
35. Dues			\$ 1691 377	52. Per Capita Tax			\$ 201 577
36. Per Capita Tax				53. Fees, Fines, Assessments, etc.			
37. Fees			60 901	54. To Affiliates of Funds Collected on Their Behalf ...			
38. Fines				55. For Account of Affiliates			
39. Assessments			3 297	56. To Officers:		8	
40. Work Permits				(a) Gross	\$ 135 570		
41. On Behalf of Affiliates for Transmittal to Them				(b) Less Deductions	3 618		31 952
42. Sale of Supplies			1 891	57. To Employees:		9	
43. Interest			2 242	(a) Gross	\$ 217 226		
44. Dividends			493	(b) Less Deductions	44 713		172 513
45. Rents			4 520	58. Office and Administrative Expense			86 284
46. Loans Obtained	6			59. Educational and Publicity Expense			1 170
47. Sale of Investments and Fixed Assets	7		6 702	60. Professional Fees			6 743
48. Repayment of Loans Made	1			61. Benefits		11	283 676
49. From Members for Disbursement on Their Behalf				62. Loans Made		1	
50. From Other Sources	13		684 920	63. Contributions, Gifts and Grants		12	1 574
51. TOTAL RECEIPTS				64. Supplies for Resale			
(Items 35 through 50)			\$ 1 456 343	65. Purchase of Investments and Fixed Assets		10	339 926
				66. Taxes			9 663
				67. On Behalf of Individual Members			
				68. Repayment of Loans Obtained	✓6		67 007
				69. For Other Purposes	14		313 535
				70. TOTAL DISBURSEMENTS			
				(Items 52 through 69)			\$ 1 515 620

SCHEDULE 1—LOANS RECEIVABLE

Name of Officer, Employee, Member or Business Enterprise (A)	Purpose of Loan, Security, if any, and Arrangement for Repayment (B)	Loans Made During Period (C)	Repayments Received During Period (D)	Balance at End of Period (E)
1.		\$	\$	\$
2.				
3.				
4.				
5.				
6. Total Additional Listings, if any				
7. Total Loans not Listed Above				
8. Totals of lines 1 through 7		\$	\$	\$ None

(Enter the totals of columns (C), (D), and (E) in Items on page 2 as shown)

SCHEDULE 2—OTHER INVESTMENTS (See Instructions, Item 25)

Description (A)	Amount (B)
Marketable Securities:	
1. Total Cost	\$
2. Total Book Value	
3. Itemize each Marketable Security holding over \$1,000 where book value exceeds 20% of the total on line 2 above.	
(a)	
(b)	
(c)	
(d)	
Other Investments:	
4. Total Cost	16 950
5. Total Book Value	16 950
6. Itemize each Other Investment holding over \$1,000 where book value exceeds 20% of the total on line 5 above.	
(a) Milwaukee Publishers, Inc.	
(b) (Common Stock)	16 950
(c)	
(d)	
7. Total of lines 2 and 5	\$ 16 950
(Enter the total in Item on page 2 as shown) 25	

SCHEDULE 3—OTHER ASSETS (See Instructions, Item 27)

Description (A)	Book Value (B)
1.	\$
2.	
3.	
4.	
5.	
6. Total of lines 1 through 5	\$ None
(Enter the total in Item on page 2 as shown) 27	
SCHEDULE 4—OTHER LIABILITIES (See Instructions, Item 32)	
Description (A)	Amount at End of Period (B)
1. Prepaid Rent-Health & Welfare	\$ 1 244 155
2. Fund	
3.	
4.	
5.	
6.	
7.	
8.	
9. Total of lines 1 through 8	\$ 1 244 155
(Enter the total in Item on page 2 as shown) 32	

SCHEDULE 5—FIXED ASSETS (See Instructions, Item 26)

Description (A)	Cost or Other Basis (B)	Total Depreciation (if any) (C)	Book Value (D)
1. Land (Give Location): 6116/18/20& 32 6200 6310 West Bluemound Road	\$ 338 769		\$ 338 769
2. Buildings (Give Location): Same	1 368 478	\$ 73 856	1 294 622
3. Automotive Equipment	40 209	15 680	24 529
4. Office Furniture and Equipment	147 094	39 703	107 391
5. Other Fixed Assets			
6. Totals of lines 1 through 5	\$ 1 894 550	\$ 129 239	\$ 1 765 311
(Enter the total of column (D) in Item on page 2 as shown) 26			

SCHEDULE 6—LOANS PAYABLE

Source (A)	Arrangements For Repayment (B)	Loans Obtained During Period (C)	Repayment of Loans During Period (D)	Balance at End of Period (E)
1.		\$	\$	\$
2.				
3.				
4.				
5. Total from Additional Listings, if any				
6. Totals of lines 1 through 5		\$	\$	\$ None
(Enter the totals of columns (C), (D), and (E) in Items on page 2 as shown) 46 68 30				

SCHEDULE 7—SALE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 47)

Description of Assets Sold (If Land or Building, Give Location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Automobiles (4)	\$ 13 769	\$ 4 869	\$ 6 400	\$ 6 400
2. Balance due on Purchase of Property	302	302	302	302
3.				
4.				
5. Totals of lines 1 through 4	\$ 14 071	\$ 5 171	\$ 6 702	\$ 6 702
(Enter the total of column (E) in Item on page 2 as shown) 47				

SCHEDULE 8—DISBURSEMENTS TO OFFICERS (See Instructions, Item 56)

Name (A)	Title (B)	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$	\$	\$	\$	\$
2.							
3.							
4.							
5.							
6.							
7. Total from Additional Listings, if any							
8. Totals of lines 1 through 7			\$ 18,070	\$ 17,500	\$ -	\$ -	\$ 35,570
(Enter the total of column (H) in Item on page 2 as shown)							56(a)

SCHEDULE 9—DISBURSEMENTS TO EMPLOYEES (See Instructions, Item 57)

Name (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Other Direct and Indirect Disbursements		Total (H)
					Expenses Including Reimbursed Expenses (F)	Other Dis- burse- ments (G)	
1.			\$	\$	\$	\$	\$
2.							
3.							
4.							
5. Total from Additional Listings, if any							
6. Total for all employees who, during the reporting period, received \$10,000 or less gross salary, allowances, and other direct and indirect disbursements							
7. Totals of lines 1 through 6			\$ 210,893	\$ 6,333	\$ -	\$ -	\$ 217,226
(Enter the total of column (H) in Item on page 2 as shown)							57(a)

SCHEDULE 10—PURCHASE OF INVESTMENTS AND FIXED ASSETS (See Instructions, Item 65)

Description of Assets (if land or buildings, give location) (A)	Book Value (B)	Amount Paid (C)
1. Property 5610 W. Bluemound Road	\$ 57,000	\$ 57,000
2. New Buildings	240,571	240,571
3. Furniture, Fixtures & Office Equipment	13,753	13,753
4. Automobiles	28,102	28,102
5. Stock - Milwaukee Publishers, Inc.	500	500
6. Totals of lines 1 through 5	\$ 339,926	\$ 339,926
(Enter the total of column (C) in Item on page 2 as shown)		65

SCHEDULE 11—BENEFITS (See Instructions, Item 61)

Type of Benefit (A)	To Whom Paid (B)	Amount (C)
1. Out of Work		\$ 159,705
2. Insurance—Members & Employees		71,584
3. Pension—Health and Welfare		44,923
4. Sick Benefits		7,464
5. Total of lines 1 through 4		\$ 283,676
(Enter the total in Item on page 2 as shown)		61

SCHEDULE 12—CONTRIBUTIONS, GIFTS AND GRANTS
(See Instructions, Item 63)

Type (A)	Amount (B)	
1. Charities	\$	1 074
2. Gift		500
3.		
4.		
5. Total of lines 1 through 4	\$	1 574
(Enter the total in Item on page 2 as shown)63		

SCHEDULE 13—OTHER RECEIPTS (See Instructions, Item 50)

Other Services (A)	Amount (B)	
1.	\$	
2. Separate Schedule		
3.		
4.		
5.		
6. Total of lines 1 through 5	\$	684,920
4 (Enter the total in Item on page 2 as shown)50		

SCHEDULE 14—OTHER DISBURSEMENTS (See Instructions, Item 69)

Other Purposes (A)	Amount (B)	
1.	\$	
2. Separate Schedule		
3.		
4.		
5:		
6. Total of lines 1 through 5	\$	265 204
(Enter the total in Item on page 2 as shown) 69		

TEAMSTERS "GENERAL" LOCAL #200

013815

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Other Receipts:

Withdrawal/Transfer Cards	\$ 445.00
✓ Rent and Service - Health and Welfare Fund	204,367.00
✓ Prepaid Rent - Health and Welfare Fund	305,498.00
Refunds	4,051.00
Expense Reimbursement	3,785.00
From International	95,615.00
From Central Conference of Teamsters	10,000.00
Funds for Transmittal	<u>61,159.00</u>

Total (To Page 4 Schedule 13 Line 6)..... \$684,920.00

Disbursements:

For Other Purposes:

Payroll Taxes	\$ 48,331.00
Refunds	2,425.00
✓ Attendance Bonus	10,800.00
✓ Automobile Expense	15,836.00 ✓
Meeting, Committee and Stewards Expense	50,613.00 ✓
Strike Expense	24,048.00
✓ Building Maintenance	78,906.00
Interest Paid	9,660.00
Recreational Expense	1,757.00
To Health and Welfare Fund:	
Premiums Employees Strike	10,000.00
Funds for Transmittal	<u>61,159.00</u>

Total (To Page 4 Schedule 14 Line 6)..... \$313,535.00

TEAMSTERS "GENERAL" LOCAL #200

013815

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Schedule 8 - Disbursements to Officers

Name (A)	Title (B)	Status (C)	Gross Salary (D)	Allow- ances (E)	Total (H)
Roy Lane	Pres.	C	\$18,070.00	\$ 2,050.00	\$20,120.00
Frank Ranney	Sec-Treas.	C	-	6,000.00	6,000.00
Ervin Schultz	V.P.	C	-	1,775.00	1,775.00
James Flanagan	Trustee	C	-	1,775.00	1,775.00
Harvey Wallerman	Trustee	C	-	1,675.00	1,675.00
Charles Davis	Trustee	C	-	2,175.00	2,175.00
Roy Fularczyk	Trustee	C	-	2,050.00	2,050.00
Totals to Page 4 Line 8			\$18,070.00	\$17,500.00	\$35,570.00

Schedule 9 - Disbursements to Employees

Name (A)	Position (B)	Gross Salary (D)	Allow- ances (E)	Total (H)
Clarence Johannes	B.A.	\$14,070.00	\$ 750.00	\$ 14,820.00
Henry Kucera	B.A.	14,070.00	858.00	14,928.00
Gordon Rowen	Org.	12,745.00	750.00	13,495.00
Fred Hammer	Org.	12,745.00	750.00	13,495.00
Thomas Melms	Org.	12,745.00	750.00	13,495.00
Charles Scott	Org.	12,745.00	750.00	13,495.00
James Jasinski	Org.	12,745.00	750.00	13,495.00
Katherine Vedder	Bookkeeper	10,281.00		10,281.00
Employees who received \$10,000.00 or less		108,747.00	975.00	109,722.00
Total to Page 4 Line 7.....		\$210,893.00	\$6,333.00	\$217,226.00